

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1. NAME OF COMMITTEE (in full) ARAMARK Political Action Committee		2. FEC IDENTIFICATION NUMBER C00157677
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1101 Market Street ARAMARK Tower 31st		
CITY, STATE and ZIP CODE Philadelphia, PA 19107		3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (See FEC FORM 1M)

JUL 21 3 33 PM '97

4. TYPE OF REPORT

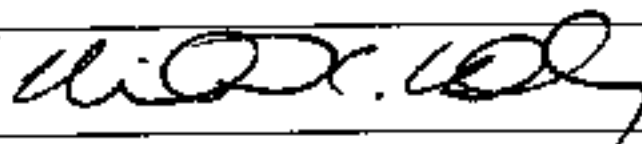
(a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

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>01/01/97</u> through <u>06/30/97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$ 180,184.52
(b) Cash on Hand at Beginning of Reporting Period	\$ 180,184.52	
(c) Total Receipts (from line 19)	\$ 40,271.14	\$ 40,271.14
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 220,455.66	\$ 220,455.66
7. Total Disbursements (from Line 30)	\$ 18,525.00	\$ 18,525.00
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	\$ 201,930.66	\$ 201,930.66
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information: 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)	\$ 0.00	
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 Michael C. Kelly		Date
Signature of Treasurer 		07-16-97

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

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised (1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
ARAMARK Political Action Committee	FROM: 01/01/97	TO: 06/30/97
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (Use Schedule A).....	1,434.00	1,434.00
ii. Unitemized.....	38,062.77	38,062.77
iii. Total.....[add i and ii]>	39,496.77	39,496.77
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	0.00	0.00
d. Total Contributions.....(add all, b and c)>	39,496.77	39,496.77
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	774.37	774.37
18. Transfers from Nonfederal Account for Joint Activity.....	0.00	0.00
19. Total Receipts.....[add 11d, 12, 13, 14, 15, 16, 17, and 18]>	40,271.14	40,271.14
20. Total Federal Receipts.....(subtract line 18 from line 19)>	40,271.14	40,271.14
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share.....	0.00	0.00
ii. Non-Federal Share.....	0.00	0.00
b. Other Federal Operating Expenditures.....	0.00	0.00
c. Total Operating Expenditures.....(Add ai, ii, and b)>	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7,750.00	7,750.00
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C.441b(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees.....	20.00	20.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (Such As PACs).....	0.00	0.00
d. Total Contribution Refunds.....[Add a, b, and c]>	20.00	20.00
29. Other Disbursements.....	10,755.00	10,755.00
30. Total Disbursements.....(Add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)>	18,525.00	18,525.00
31. Total Federal Disbursements.....(Subtract line 21 aii from line 30)>	18,525.00	18,525.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans)(from line 11d).....	39,496.77	39,496.77
33. Total Contribution Refunds (from line 28d).....	20.00	20.00
34. Net Contributions (Other than loans)(subtract line 33 from 32).....	39,476.77	39,476.77
35. Total Federal Operating Expenditures.....(add 21 ai and 21 b)>	0.00	0.00
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures.....(subtract line 36 from 35)>	0.00	0.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	2
FOR LINE NUMBER		11 a i

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)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and Zip Code CHARLES GILLESPIE 9 PROMENADE PLACE VOORHEES, NJ 08043	Name of Employer 9059	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation Sector Pres.	Payroll	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 340.00		Deduction (\$40.00) Monthly)
B. Full Name, Mailing Address and Zip Code JAMES E KSANSNAK 914 LATIMER ST PHILADELPHIA, PA 19107	Name of Employer 9964	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation Exec. VP	Payroll	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 340.00		Deduction (\$40.00) Monthly)
C. Full Name, Mailing Address and Zip Code JOSEPH NEUBAUER 210 W RITTENHOUSE SQ PHILADELPHIA, PA 19103	Name of Employer 9078	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation CEO	Payroll	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 340.00		Deduction (\$40.00) Monthly)
D. Full Name, Mailing Address and Zip Code MARTIN W SPECTOR 1010 MT PLEASANT RD BRYN MAWR, PA 19010	Name of Employer 9082	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation General Counsel	Payroll	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 340.00		Deduction (\$40.00) Monthly)
E. Full Name, Mailing Address and Zip Code CONSTANCE B GIRARD-DICARLO 7 ITHAN WOODS LANE VILLANOVA, PA 19085	Name of Employer 9354	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation Sector Pres.	Payroll	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 340.00		Deduction (\$40.00) Monthly)
F. Full Name, Mailing Address and Zip Code G. MICHAEL CRONK 834 CHESTNUT-PENN HS PHILADELPHIA, PA 19107	Name of Employer 9002	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation Sector President	Payroll	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 340.00		Deduction (\$40.00) Monthly)
G. Full Name, Mailing Address and Zip Code MARK SIMON 1355 RIVERSIDE PKWY LAWRENCEVILLE, GA 30243	Name of Employer 9575	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation Manager	Payroll	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 238.00		Deduction (\$28.00) Monthly)

SUB TOTAL of Receipts This Page (Optional) > **1,136.00**

TOTAL this Period (Last page this line number only) >

SCHEDULE A ITEMIZED RECEIPTS

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and Zip Code MICHAEL T. WATSON 5 BURNHAM PARKWAY MORRISTOWN, NJ 07960	Name of Employer Business Services Group	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 24.00 (\$2.00 Weekly)
	Occupation Manager	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 204.00		
B. Full Name, Mailing Address and Zip Code JEFFERY SOMERVILLE 633 CONDOR CT DANVILLE, CA 94506	Name of Employer 6024	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 24.00 (\$24.00 Monthly)
	Occupation Manager	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 204.00		
C. Full Name, Mailing Address and Zip Code Peter Van Veen 24040 U.S. Highway 40 Golden, CO 80401	Name of Employer Children's World	Date (Month day, Year) 06/27/97	Amount of Each Receipt this Period 250.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 250.00		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
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		
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		
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		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional).....>	298.00
TOTAL this Period (Last page this line number only).....>	1,434.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules) For each category of the Detailed Summary Page

PAGE	OF
1	1
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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
 ARAMARK Political Action Committee

A. Full Name, Mailing Address and Zip Code First Union Bank (formerly First Fidelity) P.O. Box 41531 Philadelphia, PA 19101-1531	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	02/28/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		144.85
774.37			
B. Full Name, Mailing Address and Zip Code First Union Bank (formerly First Fidelity) P.O. Box 41531 Philadelphia, PA 19101-1531	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	03/31/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		163.61
774.37			
C. Full Name, Mailing Address and Zip Code First Union Bank (formerly First Fidelity) P.O. Box 41531 Philadelphia, PA 19101-1531	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	04/30/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		152.63
774.37			
D. Full Name, Mailing Address and Zip Code First Union Bank (formerly First Fidelity) P.O. Box 41531 Philadelphia, PA 19101-1531	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	05/30/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		160.21
774.37			
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
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		
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		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional):.....>	621.30
TOTAL this Period (Last page this line number only).....>	621.30

SCHEDULE B ITEMIZED DISBURSEMENTS

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Jim Hansen Committee 5803 Oak Moss Terrace Burke, VA 22015	Jim Hansen, U.S. HOUSE 13th UT Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) Federal - General Fundraising	05/19/97	250.00
Harkin for Senate Committee c/o 1850 K Street Room 5 Washington, DC 20006-2296	Tom Harkin, U.S. SENATE IA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	02/04/97	1,000.00
Friends of Don Nickles c/o McDermott, Will 1850 K Street, NW Washington, DC 20006-2296	Don Nickles, U.S. SENATE OK Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) Federal - General Fundraising	02/21/97	500.00
National Restaurant Assoc. PAC 1200 Seventeenth Street N.W. Washington, DC 20077-6385	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997	03/20/97	5,000.00
Rangel for Congress Committee P.O. Box 5577 New York, NY 10027	Charles B. Rangel, U.S. HOUSE 15th NY Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) Federal - General Fundraising	05/23/97	1,000.00
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 Disb. 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 Disb. 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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional).....> **7,750.00**

TOTAL this Period (Last page this line number only).....> **7,750.00**

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Alliance PAC P.O. Box 132 Springfield, IL 62705	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) State/Local Contributions	05/19/97	1,000.00
Republican Com'of Chester Cty 16 Wilmont Mews West Chester, PA 19382-3206	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) State/Local Contributions	05/23/97	300.00
C. Full Name, Mailing Address and Zip Code Capitol Hill Software, Inc. 4325-E Forbes Boulevard Lanham, MD 20706	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) State/Local Contributions	03/20/97	2,500.00
D. Full Name, Mailing Address and Zip Code Our Fate's In '98 P.O. Box 466 Westmont, IL 60559-0466	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) State/Local Contributions	01/13/97	1,000.00
E. Full Name, Mailing Address and Zip Code Friends of Louis L. Goldstein P.O. Box 1110 Prince Frederick, MD 20678	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) State/Local Contributions	05/02/97	1,000.00
F. Full Name, Mailing Address and Zip Code Hudson County Democratic Organization The Meadowslands Hilton 5 Herman Cave Plaza Secaucus, NJ 07094	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) State/Local Contributions	05/19/97	400.00
G. Full Name, Mailing Address and Zip Code Friends for Lorraine Hunt 5025 South Eastern Avenue #10 Las Vegas, NV 89119	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) State/Local Contributions	05/23/97	500.00
H. Full Name, Mailing Address and Zip Code Kennard for Sheriff Conn P.O. Box 711908 Salt Lake City, UT 84171	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) State/Local Contributions	04/24/97	1,000.00
I. Full Name, Mailing Address and Zip Code Gary Locke for Governor 1420 Fifth Avenue Suite 2220 Seattle, WA 98101	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) State/Local Contributions	01/07/97	250.00

SUB TOTAL of Disbursements this page (Optional).....> **8,350.00**

TOTAL this Period (Last page this line number only).....>

SCHEDULE B ITEMIZED DISBURSEMENTS

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)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Ed McDonnell Election Fund 527 DuBois Avenue Barrington, NJ 08007	Ed McDonnell, FREEHOLDER NJ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) State/Local Contributions	04/24/97	300.00
B. Full Name, Mailing Address and Zip Code Monroe County Republican Committee 301 Exchange Boulevard Rochester, NY 14608	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) State/Local Contributions	04/24/97	800.00
C. Full Name, Mailing Address and Zip Code Friends of Tom Taft P.O. Box 25393 Anaheim, CA 92825	Purpose of Disbursement Taft, CITY COUNCIL CA Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) State/Local Contributions	01/07/97	250.00
D. Full Name, Mailing Address and Zip Code Warren for Sheriff Committee 331 Hillman Road Akron, OH 44312	Purpose of Disbursement Richard Warren, LOCAL OH Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) State/Local Contributions	04/24/97	500.00
E. Full Name, Mailing Address and Zip Code Friends of Cody Williams Committee 527 East Dobbins Road Phoenix, AZ 85040	Purpose of Disbursement Cody Williams, CITY COUNCILMAN 6th AZ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) State/Local Contributions	03/20/97	250.00
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 Disb. 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 Disb. 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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional).....> 2,100.00

TOTAL this Period (Last page this line number only).....> 10,450.00

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 <i>7-12-97</i>
<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>smu</i> PREPARER	<i>7-21-97</i> DATE PREPARED