RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

MAR 19 9 34 AM '96

March 18 , 1996

FEDERAL EXPRESS
POD

Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

Submitted herewith is the Monthly Report for the period covering February 1, 1996 through February 29, 1996 for the Ashland Inc. Political Action Committee for Employees (PACE) No. C00075994.

Sincerely,

Sharon R. Walker

Sharon R. Walker
Treasurer

rlm

Attachment

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REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

MAR 19 9 34 AM '96

1. NAME OF COMMITTEE (in full)
ASHLAND INC. PACE

ADDRESS (number and street) [ ] Check if different than previously reported
PO BOX 391

CITY, STATE and ZIP CODE
ASHLAND, KY 41114

2. FEC IDENTIFICATION NUMBER
C00075994

3. [x] 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

(b) Is this Report an Amendment? [ ] YES [x] NO

Monthly Report Due On:

[ ] February 20	[ ] June 20	[ ] October 20
[x] March 20	[ ] July 20	[ ] November 20
[ ] April 20	[ ] August 20	[ ] December 20
[ ] May 20	[ ] September 20	[ ] January 31

[ ] Twelfth day report preceeding _____ _____ _____ (Type of Election) election on _____ in the State of _____

[ ] Thirtieth day report following the General Election on _____ in the State of _____

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 02/01/96 through 02/29/96		
6. (a) Cash on Hand January 1, 1996		$ 29,913.19
(b) Cash on Hand at Beginning of Reporting Period	$ 34,061.46	
(c) Total Receipts (from Line 19)	$ 9,497.66	$ 17,145.93
(d) Subtotal	$ 43,559.12	$ 47,059.12
7. Total Disbursements (from Line 30)	$ 4,500.00	$ 8,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 39,059.12	$ 39,059.12
9. Debts and Obligations Owed TO the Committee (Itemize on Schedule C and/or D)	$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize on Schedule C and/or D)	$ 0.00	

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
Sharon R. Walker

Signature of Treasurer
Sharon R. Walker

Date
3-18-96

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

FEC FORM 3X
(revised 9/93)

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DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE ASHLAND INC. PACE	REPORT COVERING PERIOD FROM 02/01/96 TO 02/29/96	
	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	849.14	1,357.46
ii. Unitemized	8,648.52	15,788.47
iii. Total (add i and ii) ►	9,497.66	17,145.93
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contributions (add a iii, b and c) ►	9,497.66	17,145.93
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 & Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
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) ►	9,497.66	17,145.93
20. Total Federal Receipts (subtract line 18 from line 19) ►	9,497.66	17,145.93
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 a i, a 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	4,500.00	8,000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	0.00	0.00
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) ►	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ►	4,500.00	8,000.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ►	4,500.00	8,000.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	9,497.66	17,145.93
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from 32)	9,497.66	17,145.93
35. Total Federal Operating Expenditures (add 21 a i 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

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SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 1 OF

FOR LINE NUMBER 11A1

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)

ASHLAND INC. PACE

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. PHILIP W BLOCK 215 BELLEFONTE DRIVE ASHLAND, KY 41101 Receipt For: [ ] Primary [ ] General [X] Other: GENERAL CONTRIBUTION TO PAC	Name of Employer: ASHLAND INC Occupation: ADMIN VP H/R Aggregate Year-to-Date > $ 223.64	02/08/96 02/19/96 02/27/96	43.50 46.57 46.57
B. JOHN R HALL 99 STONEYBROOK DR ASHLAND, KY 41101 Receipt For: [ ] Primary [ ] General [X] Other: GENERAL CONTRIBUTION TO PAC	Name of Employer: ASHLAND INC Occupation: COFB&CHF EX OFC Aggregate Year-to-Date > $ 750.00	02/08/96 02/19/96 02/27/96	150.00 150.00 150.00
C. CHARLES F POTTS 9410 WESBIT LAKES DRIVE ALPHARETTA, GA 30202 Receipt For: [ ] Primary [ ] General [X] Other: GENERAL CONTRIBUTION TO PAC	Name of Employer: ASHLAND INC Occupation: SR VP AI&P APAC Aggregate Year-to-Date > $ 320.82	02/27/96 02/27/96	56.25 56.25
D. MICHAEL J TOOHEY 566 INNSBRUCK AVENUE GREAT FALLS, VA 22066 Receipt For: [ ] Primary [ ] General [X] Other: GENERAL CONTRIBUTION TO PAC	Name of Employer: ASHLAND INC Occupation: ASSOC DR/FD GV* Aggregate Year-to-Date > $ 250.00	02/08/96 02/19/96 02/27/96	50.00 50.00 50.00
E. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other:	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other:	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other:	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	849.14
TOTAL This Period (last page this line number only)	849.14

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

ASHLAND INC. PACE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
BLANKENBAKER FOR CONGRESS 425 MASSACHUSETTS AVENUE INDIANAPOLIS, IN 46204	VIRGINIA BLANKENBAKER U S CONGRESS IN10 Disbursement for: 96 Primary General Other:	02/14/96	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			1,000.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

ASHLAND INC. PACE

A. Full Name, Mailing Address and ZIP Code JANE SWIFT FOR CONGRESS COMMITTEE 28 BEACON STREET NORTH ADAMS, MA 01247	Purpose of Disbursement JANE SWIFT U S CONGRESS MA01 Disbursement for: [96] Primary [ ] General [ ] Other:	Date (month, day, year) 02/14/96	Amount of Each Disbursement this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other:	Date (month, day, year)	Amount of Each Disbursement this Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other:	Date (month, day, year)	Amount of Each Disbursement this Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other:	Date (month, day, year)	Amount of Each Disbursement this Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other:	Date (month, day, year)	Amount of Each Disbursement this Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other:	Date (month, day, year)	Amount of Each Disbursement this Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other:	Date (month, day, year)	Amount of Each Disbursement this Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other:	Date (month, day, year)	Amount of Each Disbursement this Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			1,000.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

ASHLAND INC. PACE

A. Full Name, Mailing Address and ZIP Code FRIENDS OF MIKE GUNK P. O. BOX 5835 BRANDON, MS 39047	Purpose of Disbursement MIKE GUNK U S CONGRESS NS03 Disbursement for: 96 Primary ☐ General ☐ Other:	Date (month, day, year) 02/16/96	Amount of Each Disbursement this Period 500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other:	Date (month, day, year)	Amount of Each Disbursement this Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other:	Date (month, day, year)	Amount of Each Disbursement this Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other:	Date (month, day, year)	Amount of Each Disbursement this Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other:	Date (month, day, year)	Amount of Each Disbursement this Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other:	Date (month, day, year)	Amount of Each Disbursement this Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other:	Date (month, day, year)	Amount of Each Disbursement this Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other:	Date (month, day, year)	Amount of Each Disbursement this Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other:	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) 500.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 4 OF

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

ASHLAND INC. PACE

A. Full Name, Mailing Address and ZIP Code CITIZENS FOR KASICH 865 MACON ALLEY COLUMBUS, OH 43206	Purpose of Disbursement JOHN KASICH U S CONGRESS OH12 Disbursement for: 96 Primary General Other:	Date (month, day, year) 02/19/96	Amount of Each Disbursement this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code PRYCE FOR CONGRESS 340 E GAY STREET COLUMBUS, OH 43215	Purpose of Disbursement DEBORAH PRYCE U S CONGRESS OH15 Disbursement for: 96 Primary General Other:	Date (month, day, year) 02/18/96	Amount of Each Disbursement this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other:	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)	2,000.00
TOTAL This Period (last page this line number only)	4,500.00

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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 3-19-96
☐	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

fes — PREPARER

3-19-96 — DATE PREPARED

FEC FORM 70-2 (12/92)

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