

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Georgia Bankers Political Action Committee J. Joseph Brannen	JUL 24 12 17 PM '95
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 50 Hurt Plaza, Suite 1050	2. FEC IDENTIFICATION NUMBER CC00092841
CITY, STATE and ZIP CODE Atlanta, GA 30303	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- Twelfth day report preceding _____ (Type of Election)
 election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
 in the State of _____
- (b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period _____ through _____		
6. (a) Cash on Hand January 1, 19 _____		\$ 38103.31
(b) Cash on Hand at Beginning of Reporting Period	\$ 38103.31	
(c) Total Receipts (from Line 10)	\$ 6615.00	\$ 6615.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 44718.31	\$ 44718.31
7. Total Disbursements (from Line 20)	\$ 3000.00	\$ 3000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 41718.31	\$ 41718.31
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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

Type or Print Name of Treasurer J. Joseph Brannen	7/21/95
Signature of Treasurer 	Date 7/21/95

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 Georgia Bankers Political Action Committee		REPORT COVERING PERIOD FROM 01/01/95- TO 06/30/95	
		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)		11(a)(i)
ii.	Unitemized	6115.00	6115.00
iii.	Total (add i and ii)	6115.00	6115.00
b.	Political Party Committees	0	11(b)
c.	Other Political Committees (such as PACs)	500.00	11(c)
d.	Total Contributions (add a iii, b and c)	6615.00	11(d)
12.	Transfers From Affiliated/Other Party Committees	0	12
13.	All Loans Received	0	13
14.	Loan Repayments Received	0	14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	16
17.	Other Federal Receipts (Dividends, Interest, etc.)	0	17
18.	Transfers from Nonfederal Account for Joint Activity	0	18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	6615.00	19
20.	Total Federal Receipts (subtract line 18 from line 19)	6615.00	20
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share		21(a)(i)
ii.	Non-Federal Share		21(a)(ii)
b.	Other Federal Operating Expenditures		21(b)
c.	Total Operating Expenditures (add a i, a ii, and b)		21(c)
22.	Transfers to Affiliated/Other Party Committees		22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	3000.00	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)	3000.00	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30)	3000.00	31
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	6615.00	32
33.	Total Contribution Refunds (from line 28d)	0	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	6615.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b)	0	35
36.	Offsets to Operating Expenditures (from line 15)	0	36
37.	Net Operating Expenditures (subtract line 36 from 35)	0	37

95039062904

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 11
FOR LINE NUMBER 11c

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)

Georgia Bankers Political Action Committee

95039062905

A. Full Name, Mailing Address and ZIP Code Bank South P.O. Box 4387, M.C. 24 Atlanta, GA 30302-4387 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/19/95	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

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)
 Georgia Banker Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Republican Party of Georgia 3091 Maple Dr. SE, Suite 315 Atlanta, GA 30305	President's Day Lunch Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/1/95	\$300.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democratic Party of Georgia 1100 Spring St. Suite 420 Atlanta, GA 30309	J.J. Dinner Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/1/95	\$1500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Republican Party of Georgia 3091 Maple Dr. SE, Suite 315 Atlanta, GA 30305	President's Dinner Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/25/95	\$1,200.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

6
9
0
2
3
6
9
9
5
9
0
3
5
9

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



BANK SOUTH, N.A.
FINANCIAL INSTITUTIONS
55 MARIETTA ST NW
ATLANTA GA 30303

164798

164798
GEORGIA BANK PAC
FEDERAL FUND
50 NURT PLZ SE STE 1050
ATLANTA GA 30303-2916

STATEMENT PERIOD
12/30/94 TO 01/31/95

YOUR TAX ID
580-25-4910

ENCLOSURES
0

PAGE 1

CCNE 000000 RMC 01-492

CHECKING/SAVINGS ACCOUNT SUMMARY

ACCOUNT NUMBER	BEGINNING BALANCE	DEPOSITS/ CREDITS	CHECKS/ DEBITS	INTEREST PAID	ENDING BALANCE
COMMERCIAL CHECKING 164798	38,103.31	.00	.00	.00	38,103.31

-----CHECKING ACCOUNT:-----

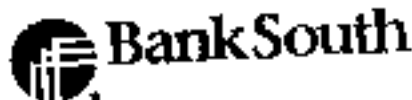
164798-----

BALANCE SUMMARY

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
12/30	58,103.31				

FOR CUSTOMER SERVICE CALL 404-761-4149.

95039862907



Statement of Account

BANK SOUTH, N.A.
FINANCIAL INSTITUTIONS
55 MARIETTA ST NW
ATLANTA GA 30303

164798

GEORGIA BANK PAC
FEDERAL FUND
50 HURT PLZ SE STE 1050
ATLANTA GA 30303-2916

STATEMENT PERIOD
01/31/95 TO 02/28/95

YOUR TAX ID
580-25-4910

ENCLOSURES
PAGE 1

BC37 0002138 RMC 01-492

CHECKING/SAVINGS ACCOUNT SUMMARY

ACCOUNT NUMBER	BEGINNING BALANCE	DEPOSITS/ CREDITS	CHECKS/ DEBITS	INTEREST PAID	ENDING BALANCE
COMMERCIAL CHECKING 164798	38,103.31	.00	1,200.00	.00	36,903.31

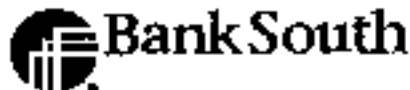
-----CHECKING ACCOUNT: 164798-----

CHECKS	DATE...CK NO...	AMOUNT	DATE...CK NO...	AMOUNT
	02/03 363	1,200.00		

BALANCE SUMMARY	DATE...	AMOUNT	DATE...	AMOUNT
TE	01/31	38,103.31	02/03	36,903.31

EFFECTIVE 4/1/95, ON ALL ACCOUNTS, THE CHARGE FOR INSUFFICIENT FUNDS OR A STOP PAYMENT REQUEST WILL BE \$26. IF YOU HAVE ANY QUESTIONS, PLEASE CALL 761-4149. THANK YOU FOR CHOOSING BANK SOUTH.

FOR CUSTOMER SERVICE CALL 404-761-4149.



Statement of Account

BANK SOUTH, N.A.
FINANCIAL INSTITUTIONS
55 MARIETTA ST NW
ATLANTA GA 30303

164798

164798
GEORGIA BANK PAC
FEDERAL FUND
50 HURT PLZ SE STE 1050
ATLANTA GA 30303-2916

STATEMENT PERIOD
02/28/95 TO 03/31/95

YOUR TAX ID
580-25-4910

ENCLOSURES 0

PAGE 1

CCHE 0000748 RMC 01-492

CHECKING/SAVINGS ACCOUNT SUMMARY

ACCOUNT NUMBER	BEGINNING BALANCE	DEPOSITS/ CREDITS	CHECKS/ DEBITS	INTEREST PAID	ENDING BALANCE
COMMERCIAL CHECKING 2 164798	36,903.31	.00	.00	.00	36,903.31

-----CHECKING ACCOUNT: 164798-----

BALANCE SUMMARY

DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT
02/28	36,903.31				

FOR A COPY OF OUR FULL FEE SCHEDULE AND DISCLOSURES, PLEASE CONTACT YOUR BRANCH.

EFFECTIVE 4/1/95, ON ALL ACCOUNTS, THE CHARGE FOR INSUFFICIENT FUNDS OR A STOP PAYMENT REQUEST WILL BE \$26. IF YOU HAVE ANY QUESTIONS, PLEASE CALL 761-4149. THANK YOU FOR CHOOSING BANK SOUTH.

FOR CUSTOMER SERVICE CALL 404-761-4149.



Statement of Account

BANK SOUTH, N.A.
FINANCIAL INSTITUTIONS
55 MARIETTA ST NW
ATLANTA GA 30303

164798
D



|303032916508|
GEORGIA BANK PAC
FEDERAL FUND
50 HURT PLZ SE STE 1050
ATLANTA GA 30303-2916

STATEMENT PERIOD
03/31/95 TO 04/28/95

YOUR TAX ID
580-25-4910

ENCLOSURES

PAGE 1

BC37 0002079 RMC 01-492

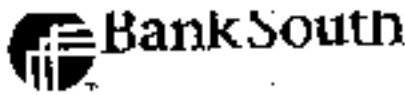
CHECKING/SAVINGS ACCOUNT SUMMARY

ACCOUNT NUMBER	BEGINNING BALANCE	DEPOSITS/ CREDITS	CHECKS/ DEBITS	INTEREST PAID	ENDING BALANCE
COMMERCIAL CHECKING 164798	36,903.31	.00	1,500.00	.00	35,403.31
CHECKING ACCOUNT:			164798		

CHECKS			DATE...CK NO.....AMOUNT			DATE...CK NO.....AMOUNT		
DATE...	CK NO.....	AMOUNT	DATE...	CK NO.....	AMOUNT	DATE...	CK NO.....	AMOUNT
04/11	365	1,500.00						
BALANCE SUMMARY			DATE.....AMOUNT			DATE.....AMOUNT		
DATE.....	AMOUNT	DATE.....	AMOUNT	DATE.....	AMOUNT	DATE.....	AMOUNT	DATE.....
03/31	36,903.31	04/11	35,403.31					

FOR CUSTOMER SERVICE CALL 404-761-4149.

0
1
2
3
4
5
6
7
8
9



16479

BANK SOUTH, N.A.
FINANCIAL INSTITUTIONS
55 MARIETTA ST NW
ATLANTA GA 30303

16479
GEORGIA BANK PAC
FEDERAL FUND
50 HURT PLZ SE STE 1050
ATLANTA GA 30303-2916

STATEMENT PERIOD
04/28/95 TO 05/31/95

YOUR TAX ID
580-25-4910

ENCLOSURES
PAGE 1

CCNE 0000761 PNC 01-492

CHECKING/SAVINGS ACCOUNT SUMMARY

ACCOUNT NUMBER	BEGINNING BALANCE	DEPOSITS/ CREDITS	CHECKS/ DEBITS	INTEREST PAID	ENDING BALANCE
COMMERCIAL CHECKING 164798	35,403.31	1,880.00	.00	.00	37,283.31

-----CHECKING ACCOUNT: 164798-----

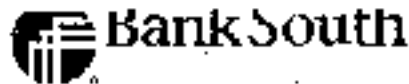
DEPOSITS			DEBITS		
DATE	CR NO	AMOUNT	DATE	CR NO	AMOUNT
05/08		540.00	05/23		125.00
			05/26		1,215.00

BALANCE SUMMARY			
DATE	AMOUNT	DATE	AMOUNT
04/28	35,403.31	05/23	36,068.31
05/08	35,943.31	05/26	37,283.31

FOR CUSTOMER SERVICE CALL 404-761-0149.

9 5 0 3 9 6 2 9 1

*Preceding check number mistak



Statement of Account

BANK SOUTH
FINANCIAL INSTITUTIONS
55 MARIETTA ST NW
ATLANTA GA 30303

164798

GEORGIA BANK PAC
FEDERAL FUND
50 HURT PLZ SE STE 1050
ATLANTA GA 30303-2916

STATEMENT PERIOD
05/31/95 TO 06/30/95

YOUR TAX ID
580-25-4910

ENCLOSURES

PAGE 1

2

RC37 0002025 BMC 01-492

CHECKING/SAVINGS ACCOUNT SUMMARY

ACCOUNT NUMBER	BEGINNING BALANCE	DEPOSITS/ CREDITS	CHECKS/ DEBITS	INTEREST PAID	ENDING BALANCE
COMMERCIAL CHECKING 164798	37,283.31	4,845.00	410.00	.00	41,718.31

-----CHECKING ACCOUNT:

164798-----

DEPOSITS

DATE...CR NO.....	AMOUNT	DATE...CR NO.....	AMOUNT	DATE...CR NO.....	AMOUNT
06/19	1,865.00	06/28	1,530.00		
06/28	210.00	06/30	1,240.00		

CHECKS

DATE...CK NO.....	AMOUNT	DATE...CK NO.....	AMOUNT	DATE...CK NO.....	AMOUNT
06/01 364	300.00				

OTHER DEBITS

DATE.....	AMOUNT.....	TRANSACTION DESCRIPTIONS
06/30	110.00	DEBIT ADJUSTMENT

BALANCE SUMMARY

DATE.....	AMOUNT.....	DATE.....	AMOUNT.....	DATE.....	AMOUNT.....
05/31	37,283.31	06/19	38,848.31	06/30	41,718.31
06/01	36,983.31	06/20	40,588.31		

FOR CUSTOMER SERVICE CALL 404-761-4149.

**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

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

7-21-95

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

SMH

PREPARER

7-24-95

DATE PREPARED

95039062913