

For Other Than An Authorized Committee (Summary Page)

FEDERAL ELECTION COMMISSION MAIL ROOM

OCT 31 12 04 PM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

NAME OF COMMITTEE (in full)
 Motor Cycle Rights Fund
 Politically Active Cyclists

ADDRESS (number and street) Check if different than previously reported
 P.O. Box 1808

CITY, STATE and ZIP CODE
 Washington, Dc 20013

2. FEC IDENTIFICATION NUMBER
 C 0029 8352

3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

- 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
 - March 20
 - April 20
 - May 20
 - June 20
 - July 20
 - August 20
 - September 20
 - October 20
 - November 20
 - December 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

5. Covering Period	7-1-96	through	9-30-96	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a)	Cash on Hand January 1, 19				\$ 128.17
(b)	Cash on Hand at Beginning of Reporting Period			\$ 582.45	
(c)	Total Receipts (from Line 19)			\$ 50.00	\$ 575.00
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)			\$ 632.45	\$ 703.17
7. Total Disbursements (from Line 30)				\$ 344.40	\$ 415.12
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))				\$ 288.05	\$ 288.05
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)				\$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)				\$ 0	

For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9580 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
 Thomas Lee Pauler

Signature of Treasurer
Thomas L. Pauler

Date
 10-19-96

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

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

(revised 1/1/91)

NAME OF COMMITTEE <i>Motorcycle Rights Fund Politically Active Cyclists</i>		REPORT COVERING PERIOD FROM <i>7-1-96</i> TO <i>9-30-96</i>	
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)			
ii. Unitemized		<i>50.00</i>	<i>75.00</i>
iii. Total	(add i and ii) >	<i>50.00</i>	<i>75.00</i>
b. Political Party Committees			
c. Other Political Committees (such as PACs)			<i>500.00</i>
d. Total Contributions	(add a iii, b and c) >	<i>50.00</i>	<i>575.00</i>
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)			
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	<i>50.00</i>	<i>575.00</i>
20. Total Federal Receipts	(subtract line 16 from line 19) >		
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures			
c. Total Operating Expenditures	(add a i, ii, and b) >		
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		<i>300.00</i>	<i>300.00</i>
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds	(add a, b and c) >		
29. Other Disbursements		<i>44.40</i>	<i>145.12</i>
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28c, and 29) >	<i>344.40</i>	<i>415.12</i>
31. Total Federal Disbursements	(subtract line 21 ii from line 30) >		
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)		<i>50.00</i>	<i>575.00</i>
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans) (subtract line 33 from 32)		<i>50.00</i>	<i>575.00</i>
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >		
36. Offsets to Operating Expenditures (from line 15)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 11 OF FOR LINE NUMBER 23

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)

Motorcycle Rights Fund Politically Active Cyclists

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Condit for Congress P.O. Box 1710 Medesto, CA 95353	Dinner Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/17/96	\$250.00
B. Full Name, Mailing Address and ZIP Code Clement for Congress 545 Harnett Dr. Ste 780 Nashville TN 37214	Breakfast Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/10/96	\$50.00
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)

300.00

**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.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

10-28-96

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

JES

PREPARER

10-31-96

DATE PREPARED