

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

(revised 1/1/81)

| NAME OF COMMITTEE The Society of the Plastics Industry, Inc. Political Action Committee (PlasticsPAC) | | REPORT COVERING PERIOD FROM 4.1.96 TO 6.30.96 | |
|-------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------|---------------------------|
| 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) | | 3,000 | 6,800 |
| ii. Unitemized | | 500 | 500 |
| iii. Total (add i and ii) > | | 3,500 | 7,300 |
| b. Political Party Committees | | 0 | 0 |
| c. Other Political Committees (such as PACs) | | 0 | 0 |
| d. Total Contributions (add a ii, b and c) > | | 3,500 | 7,300 |
| 12. Transfers From Affiliated/Other Party Committees | | 0 | 0 |
| 13. All Loans Received | | 0 | 0 |
| 14. Loan Repayments Received | | 0 | 0 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) | | 68.43 | 68.43 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | | 0 | 0 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | | 0 | 0 |
| 18. Transfers from Nonfederal Account for Joint Activity | | 0 | 0 |
| 19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) > | | 3,568.43 | 7,368.43 |
| 20. Total Federal Receipts (subtract line 18 from line 19) > | | 3,568.43 | 7,368.43 |
| II. Disbursements | | | |
| 21. Operating Expenditures: | | | |
| a. Shared Federal/Non-Federal Activity (from Schedule H4) | | | |
| i. Federal Share | | 0 | 0 |
| ii. Non-Federal Share | | 0 | 0 |
| b. Other Federal Operating Expenditures | | 68.43 | 109.60 |
| c. Total Operating Expenditures (add a i, ii, and b) > | | 68.43 | 109.60 |
| 22. Transfers to Affiliated/Other Party Committees | | 0 | 0 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | | 1,000 | 1,000 |
| 24. Independent Expenditures (use Schedule E) | | 0 | 0 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | | 0 | 0 |
| 26. Loan Repayments Made | | 0 | 0 |
| 27. Loans Made | | 0 | 0 |
| 28. Refunds of Contributions To: | | | |
| a. Individual/Persons Other Than Political Committees | | 0 | 0 |
| b. Political Party Committees | | 0 | 0 |
| c. Other Political Committees (such as PACs) | | 0 | 0 |
| d. Total Contribution Refunds (add a, b and c) > | | 0 | 0 |
| 29. Other Disbursements | | 0 | 0 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) > | | 1,068.43 | 1,109.60 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) > | | 1,068.43 | 1,109.60 |
| III. Net Contributions/Operating Expenditures | | | |
| 32. Total Contributions (other than loans)(from line 11d) | | 3,500 | 7,300 |
| 33. Total Contribution Refunds (from line 28d) | | 0 | 0 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | | 3,500 | 7,300 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) > | | 68.43 | 109.60 |
| 36. Offsets to Operating Expenditures (from line 15) | | 68.43 | 68.43 |
| 37. Net Operating Expenditures (subtract line 36 from 35) > | | 0 | 41.17 |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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)

The Society of the Plastics Industry, Inc. Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|-----------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-------------------------|------------------------------------|
| Harry B. Ussery 27 Rocky Creek Lane Greenville, SC 29615 | Beacon Plastics. Occupation President | 4.9.96 | \$1,000 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ | | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| John Witt 6186 Culbertson Road Greenville, OH 45331 | Witt Plastics, Inc. Occupation President | 4.9.96 | \$1,000. |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| David D. Antoni 6252 Little Minch Court Dublin, OH 43017 | Ashland Chemicals Occupation | 6.1.96 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 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 |
| Frank Nissel 8 Carey Drive Ambler, PA 19002 | WELEX, Inc. Occupation President | 6.18.96 | \$500.00 |
| 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 |
| 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 |
| 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 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ | | |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

The Society of the Plastics Industry, Inc. Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|-------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------|
| Fund for a Responsible Future P.O. Box 16047 Alexandria, VA 22302 | Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 6.27.96 | \$1,000.00 |
| B. 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) | | |
| C. 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) | | |
| 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) | | |

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

7/12/96

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

ES.
PREPARER

7/15/96
DATE PREPARED