

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 22 11 34 AM '97

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Community Action Program Political Action
Committee

ADDRESS (number and street) Check if different than previously reported
2100 M Street, NW - Suite 604

CITY, STATE and ZIP CODE
Washington, D.C. 20037

2. FEC IDENTIFICATION NUMBER
C00163048

3. 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
- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election 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 Jan. 01, 1997 through June 30, 1997		
6. (a) Cash on Hand January 1, 1997		\$ 5,715.45
(b) Cash on Hand at Beginning of Reporting Period	\$ 5,715.45	
(c) Total Receipts (from Line 19)	\$ 59,030.34	\$ 59,030.34
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 64,745.79	\$ 64,745.79
7. Total Disbursements (from Line 30)	\$ 62,463.55	\$ 62,463.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 2,282.24	\$ 2,282.24
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 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 2,500.00	

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: David A. Bradley

Signature of Treasurer: *David A. Bradley* Date: 7/18/97

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

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FEC FORM 3X
(revised 8/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
Community Action Program 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)	\$10,276.00	\$10,276.00	11a
ii. Unitemized	45,754.34	45,754.34	11b
iii. Total (add i and ii) >	56,030.34	56,030.34	11c
b. Political Party Committees	0	0	11d
c. Other Political Committees (such as PACs)	500.00	500.00	11e
d. Total Contributions (add a ii, b and c) >	56,530.34	56,530.34	11f
12. Transfers From Affiliated/Other Party Committees	0	0	12
13. All Loans Received	2,500.00	2,500.00	13
14. Loan Repayments Received	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0	17
18. Transfers from Nonfederal Account for Joint Activity	0	0	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	\$59,030.34	\$59,030.34	19
20. Total Federal Receipts (subtract line 18 from line 19) >	\$59,030.34	\$59,030.34	20
II Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	0	21a
ii. Non-Federal Share	0	0	21b
b. Other Federal Operating Expenditures	0	0	21c
c. Total Operating Expenditures (add a i, a ii, and b) >	0	0	21d
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	\$62,000.00	\$62,000.00	23
24. Independent Expenditures (use Schedule E)	0	0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26. Loan Repayments Made	0	0	26
27. Loans Made	0	0	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	463.55	463.55	28a
b. Political Party Committees	0	0	28b
c. Other Political Committees (such as PACs)	0	0	28c
d. Total Contribution Refunds (add a, b and c) >	463.55	463.55	28d
29. Other Disbursements	0	0	29
30. Total Disbursements (add 21d, 22, 23, 24, 25, 26, 27, 28d, and 29) >	\$62,463.55	\$62,463.55	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	\$62,463.55	\$62,463.55	31
III Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	\$56,530.34	\$56,530.34	32
33. Total Contribution Refunds (from line 28d)	463.55	463.55	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	\$56,066.79	\$56,066.79	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0	0	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0	0	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 6
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)

Community Action Program Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sandra Julifs 40 Carriage Hill Drive Sterling, IL 61081	Tri-County Opportunities Council	2/06/97	\$200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Director	Aggregate Year-to-Date > \$ 200	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ruby Hargrave 99-647 Aiea Heights Dr. Aiea, Hawaii 96701	Honolulu CAP	2/12/97	\$200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Exec. Director	Aggregate Year-to-Date > \$ 200	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Breeden Rt. 3, Box 182 Durant, OK 74701	Big Five Community Services	2/18/97	\$200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Staff	Aggregate Year-to-Date > \$ 200	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeanne Butream 7880 Lincole Place Lisbon, OH 44432	CAA of Columbiana County	2/18/97	\$200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Staff	Aggregate Year-to-Date > \$ 200	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leon Rogers Box 457 Shawnee, OK 74802	Action, Inc.	2/18/97	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Director	Aggregate Year-to-Date > \$ 500	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Allen Leaird 100 Meta/ P.O. Box 88 Coalgate, OK 74538	Action, Inc.	2/18/97	\$200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Board Member	Aggregate Year-to-Date > \$ 200	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W.J. Haddock Rt. 1, Box 344 Hendrix, OK 74741	Action, Inc.	2/18/97	\$200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Staff	Aggregate Year-to-Date > \$ 200	

SUBTOTAL of Receipts This Page (optional) \$1,700.00

TOTAL This Period (see page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 6
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

Community Action Program Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Jackie Watson Rt. 1, Box 524 Marietta, OK 73448</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Action, Inc.</p> <p>Occupation Executive Staff</p> <p>Aggregate Year-to-Date > \$ 200</p>	<p>Date (month, day, year) 2/18/97</p>	<p>Amount of Each Receipt this Period \$200</p>
<p>B. Full Name, Mailing Address and ZIP Code Thomas Wood 1019 Way Thru The Woods Decatur, AL 35603</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer CA&CDA of North AL</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date > \$ 200</p>	<p>Date (month, day, year) 2/24/97</p>	<p>Amount of Each Receipt this Period \$200</p>
<p>C. Full Name, Mailing Address and ZIP Code Gloria Griffin 87 North Street Auburn, NY 13021</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Cayuga/Seneca CAA</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date > \$ 200</p>	<p>Date (month, day, year) 2/27/97</p>	<p>Amount of Each Receipt this Period \$200</p>
<p>D. Full Name, Mailing Address and ZIP Code Patricia Gibbs 58440 Werderman Lenox Township, MI 48048</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Macomb County CSA</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date > \$ 200</p>	<p>Date (month, day, year) 2/27/97</p>	<p>Amount of Each Receipt this Period \$200</p>
<p>E. Full Name, Mailing Address and ZIP Code Mary Dusek RR 1 Box 230 Loup City, NE 68853</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Central Nebraska Community Services</p> <p>Occupation Executive Staff</p> <p>Aggregate Year-to-Date > \$ 200</p>	<p>Date (month, day, year) 2/27/97</p>	<p>Amount of Each Receipt this Period \$200</p>
<p>F. Full Name, Mailing Address and ZIP Code Lois Leggiero 922 17th Street Union City, NJ 07087</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer North Hudson CAC</p> <p>Occupation Agency Volunteer</p> <p>Aggregate Year-to-Date > \$ 200</p>	<p>Date (month, day, year) 3/4/97</p>	<p>Amount of Each Receipt this Period \$200</p>
<p>G. Full Name, Mailing Address and ZIP Code Joanne Matthiae 6634 Winding Way Deforest, WI 53532</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer CAC for South Central Wisconsin</p> <p>Occupation Executive Staff</p> <p>Aggregate Year-to-Date > \$ 200</p>	<p>Date (month, day, year) 3/7/97</p>	<p>Amount of Each Receipt this Period \$200</p>

SUBTOTAL of Receipts This Page (optional) \$1,400.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

Community Action Program Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Dusek RR 1 Box 230 Loup City, NE 68853	Central Nebraska Community Services	3/10/97	\$200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Staff Aggregate Year-to-Date > \$ 400		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Beloris Johnson 3385 St. Vincent Terrace Lakeland, FL 33813	FL Assn. for CAAs	3/13/97	\$200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President Aggregate Year-to-Date > \$ 200		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marsha Kreucher 817 West High ST Jackson, MI 49204	Region II CAA	3/13/97	\$210
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Director Aggregate Year-to-Date > \$ 210		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Karl Reutling P.O. Box 111 New Bremen, NY 13367	Lewis County Oppor- tunities	3/13/97	\$600
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Director Aggregate Year-to-Date > \$ 600		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gloria Dawson PO Box 219 Weston, VT 05161	SE VT Community Action	3/13/97	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Director Aggregate Year-to-Date > \$ 250		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Ann Vandemark 1990 E. Deckerville Rd. Caro, MI 48723	Human Development Commission	3/13/97	\$300
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Director Aggregate Year-to-Date > \$ 300		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lenora Broome 17 Southlake Drive Savannah, GA 31410	Economic Opportunity for Savannah-Chatham County Area	3/13/97	\$225
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Staff Aggregate Year-to-Date > \$ 300		

SUBTOTAL of Receipts This Page (optional) \$1,985.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 6

FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

Community Action Program Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Louis Clark 215 Hulburt Road Syracuse, NY 13224</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer PEACE, Inc.</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date > \$ 228</p>	<p>Date (month, day, year) 3/13/97</p>	<p>Amount of Each Receipt this Period \$228</p>
<p>B. Full Name, Mailing Address and ZIP Code Linda Pryor 5900 Bostwick Road Bostwick, GA 30623</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Action, Inc.</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date > \$ 200</p>	<p>Date (month, day, year) 3/13/97</p>	<p>Amount of Each Receipt this Period \$200</p>
<p>C. Full Name, Mailing Address and ZIP Code Joyce Dorsey 3739 Chateaguay Drive Decatur, GA 30034</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer DeKalb County EOA</p> <p>Occupation Executive Staff</p> <p>Aggregate Year-to-Date > \$ 250</p>	<p>Date (month, day, year) 3/13/97</p>	<p>Amount of Each Receipt this Period \$250</p>
<p>D. Full Name, Mailing Address and ZIP Code John Wilson 262 Locust Avenue Washington, PA 15301</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer PA Directors Assn for Community Action</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date > \$ 565</p>	<p>Date (month, day, year) 3/13/97</p>	<p>Amount of Each Receipt this Period \$565</p>
<p>E. Full Name, Mailing Address and ZIP Code Ruth Cunningham 5113 Beacon Drive Birmingham, AL 35210</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Jefferson County CEO</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date > \$ 500</p>	<p>Date (month, day, year) 3/13/97</p>	<p>Amount of Each Receipt this Period \$500</p>
<p>F. Full Name, Mailing Address and ZIP Code Myla Dutton 2072 E Arizona Avenue Provo, UT 84606</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Community Action Services</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date > \$ 300</p>	<p>Date (month, day, year) 3/13/97</p>	<p>Amount of Each Receipt this Period \$300</p>
<p>G. Full Name, Mailing Address and ZIP Code L.T. Ross 2247 Western Avenue Knoxville, TN 37950</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Knoxville CAC</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date > \$ 200</p>	<p>Date (month, day, year) 3/17/97</p>	<p>Amount of Each Receipt this Period \$200</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$2,443.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 6
FOR LINE NUMBER 1115, 1116

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NAME OF COMMITTEE (In Full)

Community Action Program Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Dlhosh PO Box 2711 Martinsburg, WV 25401	Tealmon Corporation	3/17/97	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Director Aggregate Year-to-Date > \$ 250		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peggy Buerhaus 283 Lakeview Drive, NE Lancaster, OH 43130	Lancaster-Fairfield CAP	3/18/97	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Agency Staff Aggregate Year-to-Date > \$ 500		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cassandra Boykin 821 Daphmont Drive Daphne, AL 36526	CA of Talladega, Clay & Randolph Counties	3/18/97	\$200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Wife of Exec. Dir. Aggregate Year-to-Date > \$ 200		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elizabeth Butream 7880 Lincoln Place Lisbon, OH 44432	CAA of Columbiana County	3/18/97	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Staff Aggregate Year-to-Date > \$ 500		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Oklahoma CAP-PAC Box 1088 Altus, OK 73522	Oklahoma CAP-PAC	3/25/97	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$ 500		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marya Brackins PO Box 13222 Tallahassee, FL 32317	Capital Area Community Action	3/26/97	\$215
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Staff Aggregate Year-to-Date > \$ 215		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patricia Lindeman 6702 State Rt. ZZ West Plains, MO 65775	Ozark Action, Inc.	4/10/97	\$200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) \$2,365.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

Community Action Program Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Tomnie Barnett 8409 E. 93rd Street Kansas City, MO 64138</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer United Services of Greater Kansas</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date > \$ 230</p>	<p>Date (month, day, year) 4/10/97</p>	<p>Amount of Each Receipt this Period \$230</p>
<p>B. Full Name, Mailing Address and ZIP Code Karl Pnazek 3411 Plover Road Plover, WI 54467</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer CAP Services, Inc.</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date > \$ 385</p>	<p>Date (month, day, year) 6/17/97</p>	<p>Amount of Each Receipt this Period \$385</p>
<p>C. Full Name, Mailing Address and ZIP Code Lorrie Benson 5300 S. Dove Lane Lincoln, NE 68516</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Assn. of Nebraska Community Action</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date > \$ 268</p>	<p>Date (month, day, year) 6/23/97</p>	<p>Amount of Each Receipt this Period \$268</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$883.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>\$10,776.00</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

Community Action Program Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democratic Senatorial Campaign Committee 430 South Capitol Street, SW Washington, DC 20003	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/03/97	\$5,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Grassley for Senate 4010 Franconia Road Alexandria, VA 22310-2136	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/11/97	\$2,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Re-Elect Nancy Johnson to Congress Committee 343 Cannon House Office Bldg Washington, DC 20515-0706	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/13/97	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Alaskans for Don Young 2111 Rayburn House Office Bldg Washington, DC 20515-0201	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/6/97	\$1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Kent Conrad 724 Senate Hart Office Bldg Washington, DC 20510-3403	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/6/97	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Web Watkins for Congress 2312 Rayburn House Offc. Bldg Washington, DC 20515	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/7/97	\$2,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Byron Dorgan 713 Hart Senate Office Bldg Washington, DC 20510	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/10/97	\$5,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Keep McDade in Congress Committee 4451 Brookfield Chantilly, VA 20151	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/11/97	\$500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lazio for Congress PO Box 5063 Bay Shore, NY 11706	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/11/97	\$500.00

SUBTOTAL of Disbursements This Page (optional)

\$18,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Community Action Program Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Murkowski '98 2300 Clarendon Blvd. Suite 1010 Arlington, VA 22201	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/17/97	\$1,000.00
B. Full Name, Mailing Address and ZIP Code Citizens for David Obey 2462 Rayburn House Offc Bldg Washington, DC 20515	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/17/97	\$2,500.00
C. Full Name, Mailing Address and ZIP Code Friends of Newt Gingrich P.O. Box 1399 Roswell, GA 30077	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/17/97	\$1,000.00
D. Full Name, Mailing Address and ZIP Code Committee for a Democratic Majority 315 Russell Senate Offc Bldg Washington, DC 20510	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/17/97	\$5,000.00
E. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 South Capitol St. SE Washington, DC 20003	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/17/97	\$5,000.00
F. Full Name, Mailing Address and ZIP Code Barrett for Congress 2458 Rayburn House Offc Bldg Washington, DC 20515	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/14/97	\$500.00
G. Full Name, Mailing Address and ZIP Code Beatty Brasch 2202 South 11th Street Lincoln, NE 68502	Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) refund	5/01/97	\$463.55
H. Full Name, Mailing Address and ZIP Code Kildee for Congress P.O. Box 2884 Washington, DC 20013	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/01/97	\$2,000.00
I. Full Name, Mailing Address and ZIP Code Goodlatte for Congress P.O. Box 5871 Arlington, VA 22205	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/01/97	\$1,000.00

SUBTOTAL of Disbursements This Page (optional)

\$18,463.55

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 3 OF 4
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

Community Action Program Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democratic Senatorial Campaign Committee 430 South Capitol St, SE Washington, DC 20003	Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/01/97	\$5,000.00
Luther for Congress 1399 Geneva Ave., North Suite 103, Oakdale, MN 55128	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/97	\$500.00
Weldon for Congress Committee 14024 Riverview Lane	Fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/97	\$2,000.00
Wyden for Senate 24 Northwest Second Ave. #201 Portland, OR 97209	Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/16/97	\$2,500.00
Citizens for Joe Kennedy 2242 Rayburn House Offc Bldg. Washington, DC 20515	Fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/19/97	\$5,000.00
Friends of Chris Dodd 203 C Street, NE Washington, DC 20002	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/20/97	\$3,500.00
Alaskans for Don Young 2111 Rayburn HOUSE Offc Bldg Washington, DC 20515-0201	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/29/97	\$1,000.00
A Lot of People Supporting Tom Daschle 424 C Street, NE - 1st Fl Washington, DC 20002	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/29/97	\$1,000.00
Carol Mosely-Braun for Senate 324 Hart Senate Offc Bldg Washington, DC 20510	Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/29/97	\$500.00

SUBTOTAL of Disbursements This Page (optional)

\$21,000.00

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 4 OF 4
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Community Action Program Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Newt Gingrich P.O. Box 1399 Roswell, GA 30077		5/29/97	\$1,000.00
B. Full Name, Mailing Address and ZIP Code Stabenow for Congress P.O. Box 2884 Washington, DC 20013	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/29/97	\$2,000.00
C. Full Name, Mailing Address and ZIP Code Friends of Bob Livingston 5163 General Degaulle Dr. Suite 210 New Orleans, LA 70131	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/09/97	\$1,000.00
D. Full Name, Mailing Address and ZIP Code Frank Riggs for Congress P.O. Box 16021 Alexandria, VA 22302	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/10/97	\$1,000.00
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) \$5,000.00

TOTAL This Period (last page this line number only) \$62,463.55

SCHEDULE C
(Revised 3/80)

LOANS

Name of Committee (in Full) Community Action Program Political Action Committee			
A. Full Name, Mailing Address and ZIP Code of Loan Source Mary D. Foley 914 Ravenshead Hill Sherwood Forest, MD 21405	Original Amount of Loan \$2,500.00	Cumulative Payment To Date	Balance Outstanding at Close of This Period \$2,500.00
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>6/6/97</u> Date Due <u>12/31/97</u> Interest Rate <u>0</u> % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer	/	/
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer	/	/
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer	/	/
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
Original Amount of Loan			
Cumulative Payment To Date			
Balance Outstanding at Close of This Period			
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer	/	/
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer	/	/
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer	/	/
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional)			\$2,500.00
TOTALS This Period (last page in this line only)			\$2,500.00
Carry outstanding balances only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

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

7-16-97

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

JML

PREPARER

7-28-97

DATE PREPARED