

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL The Palmetto Leadership PAC	(Check if name is changed) <input checked="" type="checkbox"/>	2. DATE APR 15 11 17 AM '97
(b) Number and Street Address P.O. Box 11691	(Check if address is changed) <input type="checkbox"/>	3. FEC IDENTIFICATION NUMBER 000076513
(c) City, State and ZIP Code Columbia, SC 29211	4. IS THIS STATEMENT AN AMENDMENT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

5. TYPE OF COMMITTEE (Check one)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
|-------------------|-----------------------------|---------------|----------------|
| | | | |
- (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
- (d) This committee is a _____ committee of the _____ (National, State or subordinate) _____ (Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization
 Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Co-op

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee book records.

Full Name	Mailing Address	Title or Position
J. Kershaw Spong	P.O. Box 11691 Columbia, SC 29211	Treasurer

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any design agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
J. Kershaw Spong	P.O. Box 11691 Columbia SC 29211	Treasurer

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code

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

TYPE OR PRINT NAME OF TREASURER J. Kershaw Spong	SIGNATURE OF TREASURER 	DATE 3/27/97
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. § 5. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Federal Election Commission
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PREPARER

4-15-97

DATE PREPARED