

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)
AMERIPAC: The Fund for a Greater America

ADDRESS (number and street) Check if different than previously reported
1341 G Street, NW, Suite 200

CITY, STATE and ZIP CODE
Washington, DC 20005

2. FEC IDENTIFICATION NUMBER
C00271338

3. This committee has qualified as a multi-endorsing committee. (See FEC FORM 1N)

Jul 30 4 38 / 97

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

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
1-1-97 through 6-30-97		
6. (a) Cash on Hand January 1, 19 97		\$ 486.56
(b) Cash on Hand at Beginning of Reporting Period	\$ 486.56	
(c) Total Receipts (from Line 18)	\$ 7,000.00	\$ 7,000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 7,486.56	\$ 7,486.56
7. Total Disbursements (from Line 30)	\$ 1,429.87	\$ 1,429.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 6,056.69	\$ 6,056.69
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ -	For further information contact Federal Election Commission 1225 E Street, NW Washington, DC 20003 Tel: Free 800-424-9530 Local 202-719-3420
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
James M. Copeland, Jr.

Signature of Treasurer

Date
7-1-97

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 28 U.S.C. 5417g.

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FEC FORM 3X

(revised 9/95)

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

(Revised 1/81)

NAME OF COMMITTEE

AMERIPAC: The Fund for a Greater America

REPORT COVERING PERIOD

FROM 1-1-97 TO 6-30-97

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)	\$ 2,000.00	\$ 2,000.00
ii. Unitemized		
iii. Total	\$ 2,000.00	\$ 2,000.00
b. Political Party Committees		
c. Other Political Committees (such as PACs)	\$ 5,000.00	\$ 5,000.00
d. Total Contributions	\$ 7,000.00	\$ 7,000.00
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	\$ 7,000.00	\$ 7,000.00
20. Total Federal Receipts	\$ 7,000.00	\$ 7,000.00

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	\$ 429.87	\$ 429.87
c. Total Operating Expenditures	\$ 429.87	\$ 429.87
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	\$ 1,000.00	\$ 1,000.00
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:		
i. Individual/Persons Other Than Political Committees		
ii. Political Party Committees		
iii. Other Political Committees (such as PACs)		
iv. Total Contribution Refunds		
29. Other Disbursements		
30. Total Disbursements	\$ 1,429.87	\$ 1,429.87
31. Total Federal Disbursements	\$ 1,429.87	\$ 1,429.87

III Contributions/Operating Expenditures

32. Total Contributions (other than loans) (from line 11d)	\$ 7,000.00	\$ 7,000.00
33. Total Contribution Refunds (from line 28d)	-	-
34. Net Contributions (other than loans) (subtract line 33 from line 32)	\$ 7,000.00	\$ 7,000.00
35. Total Federal Operating Expenditures	\$ 429.87	\$ 429.87
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures	\$ 429.87	\$ 429.87

SCHEDULE A

ITEMIZED RECEIPTS
(Contributions from Individuals)

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

PAGE 1 OF 1
FOR LINE NUMBER
11(a)1

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 any other purpose, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
AMERIPAC: The Fund for a Greater America

A. Full Name, Mailing Address and ZIP Code Michael S. Berman 2801 New Mexico Ave. NW, #817 Washington, DC 20007	Name of Employer The Duberstein Group	Date (month, day, year) 4-24-97	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code Steven M. Champlin 323 A Street, SE Washington, DC 20003	Name of Employer The Duberstein Group	Date (month, day, year) 4-24-97	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant Aggregate Year-to-Date > \$ 1,000.00		
C. 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):	Occupation 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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation 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):	Occupation 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):	Occupation 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):	Occupation Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$2,000.00

1997 - 0000 - 0000 - 0000 - 0000

SCHEDULE A

ITEMIZED RECEIPTS

(Contributions from Political Committees)

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER 11(c)

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)

AMERIPAC: The Fund for a Greater America

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (by Period)
United Food & Commercial Workers International Union 1775 K Street, NW Washington, DC 20006		6-16-97	\$ 5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$ 5,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (by Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (by Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (by Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (by Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (by Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (by Period)
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)

TOTAL This Period (last page this line number only)

\$ 5,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

(For Operating Expenses)

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

PAGE 1 OF 1
FOR LINE NUMBERED 21 (b)

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NAME OF COMMITTEE (in Full)

AMERIPAC: The Fund for a Greater America

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Perkins Coie 1201 3rd Avenue, 40th Floor Seattle, WA 98101	Legal fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3-18-97	\$ 276.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
David L. Andrukitis, Inc. 50 E Street, SE Washington, DC 20003	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-23-97	\$ 02.50
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Express Suite 0001 Chicago, IL 60679	*see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-23-97	\$ 51.20
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
*The Signature Room Washington, DC	Event cost-breakfast 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
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (fill page two line number only)

\$ 429.70

97-013-0000-0000-0000-0000

SCHEDULE B

ITEMIZED DISBURSEMENTS

(To Federal Candidates)

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

PAGE 1 OF 1
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)

AMERIPAC: The Fund for a Greater America

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Eric Serna for Congress 1996 Warner Drive Santa Fe, NM 87505	Eric Serna (D-NM) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special	5-8-97	\$1,000.00
B. 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
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)	
TOTAL This Period (last page this line number only)	\$ 1,000.00

**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
7-30-97

First Class Mail POSTMARKED

Registered/Certified Mail POSTMARKED

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

SES
PREPARER

7-31-97
DATE PREPARED

97-03-222-2344