

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

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AUG 2 8 41 AM '97

USE FEC MAILING LABEL  
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TYPE OR PRINT

C00015149	060297	2. FEC IDENTIFICATION NUMBER
J ELVIN JACKSON		034410
HEFNER FOR CONGRESS COMMITTEE		3. IS THIS REPORT AN AMENDMENT?
P.O. BOX 3016	NC 28025	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
CONCORD		

## 4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
<input type="checkbox"/> July 15 Quarterly Report	<input type="checkbox"/> 30-Day Post-Election Report for the _____ (Type of Election) election on _____ in the State of _____
<input type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> Termination Report
<input type="checkbox"/> January 31 Year End Report	
<input checked="" type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	

This report contains activity for:  Primary Election  General Election  Special Election  Runoff Election

## SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
1/1/97 through 6/30/97		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	67,940	67,940
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	67,940	67,940
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	31,918	31,918
(b) Total Offsets to Operating Expenditures (from Line 14)	2,785	2,785
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	29,133	29,133
8. Cash on Hand at Close of Reporting Period (from Line 27)	175,583	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	NONE	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	31,987	

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20483  
Toll Free 800-424-9530  
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	Date
J. Elvin Jackson	7/30/97
Signature of Treasurer	
<i>J. Elvin Jackson</i>	

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 3  
(revised 4/87)

# DETAILED SUMMARY PAGE

## of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full)	Report Covering the Period:	
Refner for Congress	From: 1/1/97	To: 6/30/97
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) -----	18,000	
(ii) Unitemized -----	7,140	
(iii) Total of contributions from Individuals -----	25,140	25,140
(b) Political Party Committees -----		
(c) Other Political Committees (such as PACs) -----	42,800	42,800
(d) The Candidate -----		
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) -----	67,940	67,940
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----</b>		
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate -----		
(b) All Other Loans -----		
(c) TOTAL LOANS (add 13(a) and (b)) -----		
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----</b>	2,785	2,785
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) -----</b>		
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----</b>	70,725	70,725
<b>II. DISBURSEMENTS</b>		
<b>17. OPERATING EXPENDITURES -----</b>	31,918	31,918
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES -----</b>		
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate -----		
(b) Of All Other Loans -----		
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----		
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees -----		
(b) Political Party Committees -----		
(c) Other Political Committees (such as PACs) -----		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----		
<b>21. OTHER DISBURSEMENTS -----</b>	850	850
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----</b>	32,768	32,768

### III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$ 137,626	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$ 70,725	24
25. SUBTOTAL (add Line 23 and Line 24) -----	\$ 208,351	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$ 32,768	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$ 175,583	27

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 5  
FOR LINE NUMBER 11A

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)  
**Hefner for Congress**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Cynthia L. Brown 125 - 11th St., SE Washington, DC 20003	Brown & Co.	5/19/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Consultant</b>	Aggregate Year-to-Date > \$ 500	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jeanne M. Campbell 1010 Pennsylvania Ave SE Washington DC 20003	Campbell-Crane	4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>	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
Daniel M. Crane 1010 Pennsylvania Ave SE Washington DC 20003	Campbell - Crane	4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>	Aggregate Year-to-Date > \$ 500	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
C. B. Crook, Jr. 1017 Belevedere Dr. Albemarle, NC 28001	Crook Motor Co	6/6/97	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Owner</b>	Aggregate Year-to-Date > \$ 250	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Murray O. Duggins 3670 Raeburn Crt. Fayetteville, NC 28314	United Property Mgmt	2/24/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>President</b>	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
William H. Edington 7106 Marine Dr. Alexandria VA 22307	Ginn Edington Wade & Sanders	4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Consultant</b>	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Aaron H. Ebird 2330 Gunners Ct. Charlotte, NC 28270	Polkton Mfg. Co	6/12/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Executive</b>	Aggregate Year-to-Date > \$ 500	

SUBTOTAL of Receipts This Page (optional) ..... **3,250.00**

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 2 OF 5  
FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)  
Hefner for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James L. Ervin 206 S. Lee St. Alexandria, VA 22314	ETA Inc. Occupation: Consultant	3/28/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500		
Alan C. Fenwick 2001 Jeff Davis Hwy 607A Arlington, VA 22202	T I Group Ubc, Occupation: VP Wash. Operation	4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500		
James M. Fitzgibbons One Lake Dr. Kannapolis, NC 28081	Fieldcrest Cannon Occupation: Chairman & CEO	4/6/97 5/20/97	500.00 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1000		
James B. Garrison 819 N. Sixth St. Albemarle, NC 28001	South Central Oil Occupation: President	6/14/97	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250		
Robert William Hodes 7506 Maritime Lane Springfield VA 22153-1626	Short Bros Occupation: VP Gov Progrms	4/23/97	500.000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 500		
Gary B. Hopper 6012 E. Rock Cliff Ln Alexandria VA 22315	PMA Inc Occupation: Gov Rltne & Leg Cnsl	6/5/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$600		
Steven M. Byjek 9006 Banyon Ridge Rd. Fairfax Station, VA 22039	Byjek & Fix Occupation: Consultant	4/23/97	750.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$750		

SUBTOTAL of Receipts This Page (optional) ..... 4,000.00

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 32 OF 5  
FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)  
Hefner for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
R. B. Jordan III P.O. Box 98 Mt. Gilead NC 27306	Jordan Lumber Co	6/12/97	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>President</b> Aggregate Year-to-Date > \$1000		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Victor A. Karam 1002 Colonial Dr. Albemarle, NC 28001	McRae Industries	4/6/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>v/p Footwear</b> 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
Cornelia C. Lyles P.O. Box 1189 Concord, NC 28025	Retired	6/30/97	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$250		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Nancy K. Magliocchetti 10203 Woodvale Pond Dr. Fairfax Station VA 22039	Housewife	5/28/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: 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
M. W. Mullinix Sr. P.O. Box 354 Richfield, NC 28137	Retired	6/14/97	500.00
Receipt For: <input checked="" 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
Bobby H. Myrick P.O. Box 728 Biscoe, NC 27209	Myrick Construction	5/30/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>Owner</b> Aggregate Year-to-Date > \$500		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Barry J. New 9814 Spring Ridge Lane Vienna VA 22182-1452	Rolls-Roter N. Amer	4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>Exec</b> Aggregate Year-to-Date > \$500		

SUBTOTAL of Receipts This Page (optional) ..... 3,750.00

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

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NAME OF COMMITTEE (in Full)

Hefner for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Samuel Ralph Preston 6434 Woodville Rd. Falls Church VA 22044	Self-emp Occupation: Consultant	4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500		
Lawrence B. Ryan 9417 Sunnyfield Crt. Potomac MD 20854	LRT Inc Occupation: Owner	4/7/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500		
Robert N. Seigle 9194 Lake Braddock Dr. Burke VA 22015	Short Brothers Occupation: Marketing	4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500		
Eddie Smith 400 National Blvd. Lexington NC 27292	Natl Wholesale Occupation: Owner/Pres	6/14/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500		
Roger F. Snyder 1744 Bellamy Cir Albemarle, NC 28001	E.J. Snyder & CO Occupation: V/P	6/6/97	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1000		
Margaret Snyder 1744 Bellamy Cir Albemarle, NC 28001	Housewife Occupation:	6/6/97	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1000		
Nellie R. Teske 533 Crestview Dr. Albemarle, NC 28001	Retired Occupation:	6/14/97	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1000		

SUBTOTAL of Receipts This Page (optional) ..... 5,000.00

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

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NAME OF COMMITTEE (in Full)

Hefner for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Brian Thiel 12505 Lolly Post Ln Woodbridge VA 22192	Paul Magliocchetti Assoc	5/19/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>Consultant</b> Aggregate Year-to-Date: \$500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mark M. Waclawski 409 Colin Ln. NW Alexandria VA 22306	Paul Magliocchetti Assoc	4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>Gov Rltngs &amp; Leg Cnsl</b> 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
Katharine Calhoun Wood 2402 Popkins Lane Alexandria VA 22306	Hart Dorton & Assoc	3/28/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>Consultant</b> Aggregate Year-to-Date: \$500		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
H. M. Ebird P.O. Box 220 Marshville NC 28103	Polkton Mfg.	6/12/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>President</b> 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
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)

2,000.00

TOTAL This Period (last page this line number only)

18,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 9  
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (In Full)  
Hefner for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Action comm for Rural Electrification 4031 Wilson Blvd. Arlington VA 22203-1860		3/28/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$500	
B. Full Name, Mailing Address and ZIP Code Air Line Pilots Assoc PAC 1625 Mass Ave NW Washington DC 20036		4/29/97	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$1000	
C. Full Name, Mailing Address and ZIP Code Allegheny Ludlum Corp PAC 1000 Six PPG Pl Pittsburgh PA 15222		4/29/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$500	
D. Full Name, Mailing Address and ZIP Code Alliant Techsystems Inc PAC 600 - 2nd St., NE Hopkins, MN 55343		4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$500	
E. Full Name, Mailing Address and ZIP Code Amer Fed of Gov Emp. PAC 80 F St., NW Washington DC 20001		4/23/97	500.00
Receipt For: <input checked="" 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 Amer Maritime Officers AFL-CIO 650 Fourth Ave. Brooklyn NY 11232		4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$500	
G. Full Name, Mailing Address and ZIP Code AMer Podiatric Med Assoc PAC 9312 Old Georgetown Rd. Bethesda MD 20814-1621		4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$500	

SUBTOTAL of Receipts This Page (optional) ..... 4,000.00

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 2 OF 9  
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (In Full)  
Hefner for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Amer Sugar Cane League PAC P.O. Drawer 93B Thibodaux LA 70302		4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$500500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Amer Sugarbeet Growers Assoc PAC 1156 - 15th St NW, Ste 1020 Washington, DC 20005		4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	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
Amer Textile Ind. PAC 1801 K St. NW, Ste 900 Washington, DC 20006		4/23/97	2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$2000		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bellsouth Telecommunications Fed 675 W Peachtree St. NE, R36M66 Atlanta GA 30375	PAC	3/26/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	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
Blue Cross & Blue Shield of NC PAC P.O. Box 2294 Durham, NC 27702-2294		5/19/97	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$1000		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Boilermakers-Blacksmiths PAC 753 State Ave., Ste 565 Kansas City, KS 66101		4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$500		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Brotherhood of Maintenance of Way 400 N. Capitol St NW Washington DC 20001-1511	Bmp PAC	4/7/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$500		

SUBTOTAL of Receipts This Page (optional) ..... 5,500.00

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 3 OF 9  
FOR LINE NUMBER 11C

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)  
Hefner for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Burlington Ind. Good Gov Comm P.O. Box 21207 Greensboro, NC 27420		4/23/97	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$1000	
B. Full Name, Mailing Address and ZIP Code Carolina Pwr & Lght Co PAC P.O. Box 1510 Raleigh, NC 27602-1510		4/29/97	1,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$1500	
C. Full Name, Mailing Address and ZIP Code Coltec Ind Vol Pol Comm 430 Park Ave New York NY 10022		4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$500	
D. Full Name, Mailing Address and ZIP Code Comm for Advancement of Cotton P.O. Box 12292 Memphis TN 38182		6/25/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$500	
E. Full Name, Mailing Address and ZIP Code Computing Devices Intl PAC 8800 Queen Ave., S. Bloomington MN 55431-1996		4/29/97	500.00
Receipt For: <input checked="" 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 Demo Congressional Campaign Comm 430 S. Capitol St. Washington DC 20003		3/26/97 (In Kind)	300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$300.00	
G. Full Name, Mailing Address and ZIP Code Duke Power Emp Fed PAC P.O. Box 33189 Charlotte, NC 28242		4/30/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$500	

SUBTOTAL of Receipts This Page (optional) ..... 4,800.00

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

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)  
Hefner for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Electronic Data Systems PAC 1331 Penn Ave NW, Ste 1300 N Washington DC 20004		4/29/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$500	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronnie G. Flippo Comm P.O. Box 1221 Florence AL 35630		3/27/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Florida Sugar Cane League PAC 115 S. Lopez St. Clewiston FL 33440		4/29/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$500	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FMC Corp Good Gov Program 200 E Randolph Dr. Chicago IL 60601		5/13/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Food Marketing Inst. PAC 800 Conn Ave NW, Ste 500 Washington DC 20006-2701		4/23/97	500.00
Receipt For: <input checked="" 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
GEC-Marconi Electrnc Sys PAC 164 Totowa Rd. Wayne NJ 07470		4/29/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
General Atomics PAC P.O. Box 22930 San Diego CA 92122		4/23/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$500	

SUBTOTAL of Receipts This Page (optional) ..... 3,500.00

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 5 OF 9  
FOR LINE NUMBER 11C

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)  
**Befner for Congress**

**A. Full Name, Mailing Address and ZIP Code**  
General Dynamics PAC  
3190 Fairview Park Dr.  
Falls Church VA 22042-4523

Name of Employer

Date (month, day, year)  
3/28/97

Amount of Each Receipt this Period  
500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date > \$500

**B. Full Name, Mailing Address and ZIP Code**  
Glaxo Wellcome PAC  
5 Moore Dr.  
Resrch Tri Park NC 27709

Name of Employer

Date (month, day, year)  
4/29/97

Amount of Each Receipt this Period  
500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date > \$500

**C. Full Name, Mailing Address and ZIP Code**  
Hughes Active Citiz Fnd  
P.O. Box 80028, C-129  
Los Angeles CA 90080-0028

Name of Employer

Date (month, day, year)  
4/7/97

Amount of Each Receipt this Period  
500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date > \$500

**D. Full Name, Mailing Address and ZIP Code**  
INOPAC  
P.O. Box 6550  
Lawrenceville NJ 08648

Name of Employer

Date (month, day, year)  
4/29/97

Amount of Each Receipt this Period  
500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date > \$500

**E. Full Name, Mailing Address and ZIP Code**  
Intl Brotherhood of Teamsters PAC  
25 Louisiana Ave NW  
Washington DC 20001

Name of Employer

Date (month, day, year)  
4/7/97

Amount of Each Receipt this Period  
500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date > \$500

**F. Full Name, Mailing Address and ZIP Code**  
Intl Brotherhood of Elec Eng PAC  
1125 15th St NW  
Washington DC 20005

Name of Employer

Date (month, day, year)  
3/28/97

Amount of Each Receipt this Period  
2,000.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date > \$2000

**G. Full Name, Mailing Address and ZIP Code**  
Kaman Corp Good Gov F.  
Old Windsor Rd.  
Bloomfield CT 06002

Name of Employer

Date (month, day, year)  
4/23/97

Amount of Each Receipt this Period  
500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date > \$500

SUBTOTAL of Receipts This Page (optional)

5,000.00

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 6 OF 9  
FOR LINE NUMBER 11C

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)  
Hefner for Congress

A. Full Name, Mailing Address and ZIP Code  
Laborers Pol League  
905 16th St., NW  
Washington DC 20006

Name of Employer

Date (month, day, year)  
5/13/97

Amount of Each Receipt this Period  
500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date > \$500

B. Full Name, Mailing Address and ZIP Code  
Litton Emp PAC  
21240 Burbank Blvd.  
Woodland Hills CA 91367

Name of Employer

Date (month, day, year)  
4/7/97

Amount of Each Receipt this Period  
500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date > \$500

C. Full Name, Mailing Address and ZIP Code  
Lockheed Martin Emp PAC  
1725 Jeff Davis Hwy Ste 300  
Arlington VA 22202

Name of Employer

Date (month, day, year)  
6/5/97

Amount of Each Receipt this Period  
1,500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date > \$1500

D. Full Name, Mailing Address and ZIP Code  
Loral Spacecom PAC  
1755 Jeff Davis Hwy, Ste 1007  
Arlington VA 22202

Name of Employer

Date (month, day, year)  
3/28/97

Amount of Each Receipt this Period  
500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date > \$500

E. Full Name, Mailing Address and ZIP Code  
Lucent Technologies PAC  
900 19th St. NW, Ste 700  
Washington, DC 20006

Name of Employer

Date (month, day, year)  
5/13/97

Amount of Each Receipt this Period  
1,000.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date > \$1000

F. Full Name, Mailing Address and ZIP Code  
McDonnell Douglas Emp PAC  
1735 Jefferson Dvs Hwy, Ste 1200  
Arlington, VA 22202

Name of Employer

Date (month, day, year)  
4/23/97

Amount of Each Receipt this Period  
500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date > \$500

G. Full Name, Mailing Address and ZIP Code  
MEBA PAF Dist #1  
444 N. Capitol St NW, Ste 800  
Washington DC 20001

Name of Employer

Date (month, day, year)  
4/29/97

Amount of Each Receipt this Period  
500.00

Receipt For:  Primary  General  
 Other (specify):

Occupation

Aggregate Year-to-Date > \$500

SUBTOTAL of Receipts This Page (optional)

5,000.00

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 **7** OF **9**  
FOR LINE NUMBER **11C**

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**NAME OF COMMITTEE (In Full)**

**Befner for Congress**

**A. Full Name, Mailing Address and ZIP Code**

**NationsBank Corp. PAC  
ONE NCNB Plaza T22-1  
Charlotte, NC 28255**

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

**4/23/97**

**1,000.00**

Receipt For:

Primary

General

Other (specify):

Occupation

Aggregate Year-to-Date **> \$1000**

**B. Full Name, Mailing Address and ZIP Code**

**Natl Assoc Retired Fed Emp  
1533 New Hampshire Ave NW  
Washington DC 20036**

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

**6/25/97**

**1,000.00**

Receipt For:

Primary

General

Other (specify):

Occupation

Aggregate Year-to-Date **> \$1000**

**C. Full Name, Mailing Address and ZIP Code**

**Natl Auto Dealers Assoc PAC  
8400 Westpark Dr.  
McLean VA 22102**

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

**5/28/97**

**500.00**

Receipt For:

Primary

General

Other (specify):

Occupation

Aggregate Year-to-Date **> \$500**

**D. Full Name, Mailing Address and ZIP Code**

**Natl Rifle Assoc PAC  
11250 Waples Mill Rd.  
Fairfax VA 22030-7400**

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

**6/30/97**

**2,000.00**

Receipt For:

Primary

General

Other (specify):

Occupation

Aggregate Year-to-Date **> \$2000**

**E. Full Name, Mailing Address and ZIP Code**

**NCR Citizenship F.  
1299 Pennsylvania Ave NW  
Washington DC 20004-2400**

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

**4/23/97**

**500.00**

Receipt For:

Primary

General

Other (specify):

Occupation

Aggregate Year-to-Date **> \$500**

**F. Full Name, Mailing Address and ZIP Code**

**Newport News Shipbuilding PAC  
801 Penn Ave NW, Ste 350  
Washington DC 20004**

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

**6/27/97**

**500.00**

Receipt For:

Primary

General

Other (specify):

Occupation

Aggregate Year-to-Date **> \$500**

**G. Full Name, Mailing Address and ZIP Code**

**Northrop Grumman Corp Emp PAC  
1234 6th St., #204  
Santa Monica CA 90401**

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

**4/23/97**

**1,000.00**

Receipt For:

Primary

General

Other (specify):

Occupation

Aggregate Year-to-Date **> \$1000**

**SUBTOTAL** of Receipts This Page (optional)

**6,500.00**

**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 8 OF 9  
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)

Hefner for Congress

A. Full Name, Mailing Address and ZIP Code

OHM Clean PAC  
816 Conn Ave NW, Ste 900  
Washington, DC 20006

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

4/23/97

500.00

Occupation

Receipt For:  Primary  General  
 Other (specify):

Aggregate Year-to-Date > \$500

B. Full Name, Mailing Address and ZIP Code

Parsons Corp PAC  
100 W. Walnut St.  
Pasadena CA 91124

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

4/23/97

500.00

Occupation

Receipt For:  Primary  General  
 Other (specify):

Aggregate Year-to-Date > \$500

C. Full Name, Mailing Address and ZIP Code

Paul Magliocchetti Assoc PAC  
1755 Jeff Davis Hwyk Ste 1107  
Arlington VA 22202

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

3/28/97

500.00

Occupation

Receipt For:  Primary  General  
 Other (specify):

Aggregate Year-to-Date > \$500

D. Full Name, Mailing Address and ZIP Code

Philip Morris PAC  
120 Park Ave, 25th Floor  
New York, NY 10017

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

4/30/97

2,000.00

Occupation

Receipt For:  Primary  General  
 Other (specify):

Aggregate Year-to-Date > \$2000

E. Full Name, Mailing Address and ZIP Code

Physical Therapy PAC  
1111 N. Fairfax St.  
Alexandria VA 22314

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

6/5/97

500.00

Occupation

Receipt For:  Primary  General  
 Other (specify):

Aggregate Year-to-Date > \$500

F. Full Name, Mailing Address and ZIP Code

Realtors PAC  
430 N. Michigan Ave  
Chicago IL 60611

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

5/13/97

500.00

Occupation

Receipt For:  Primary  General  
 Other (specify):

Aggregate Year-to-Date > \$500

G. Full Name, Mailing Address and ZIP Code

RJR PAC  
P.O. Box 718  
Winston-Salem, NC 27102

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

4/23/97

500.00

Occupation

Receipt For:  Primary  General  
 Other (specify):

Aggregate Year-to-Date > \$500

SUBTOTAL of Receipts This Page (optional)

5,000.00

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 9 OF 9  
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)  
Hefner for Congress

A. Full Name, Mailing Address and ZIP Code  
Tracor PAC  
1215 Jeff Davis Hwy, Ste 1109  
Arlington VA 22202

Receipt For:  Primary  General  
 Other (specify):

Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	5/28/97	500.00
Occupation		
Aggregate Year-to-Date	> \$500	

B. Full Name, Mailing Address and ZIP Code  
Trans Commun Intl Un PAC  
3 Research PL  
Rockville, MD 30850

Receipt For:  Primary  General  
 Other (specify):

Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	3/28/97	500.00
Occupation		
Aggregate Year-to-Date	> \$500	

C. Full Name, Mailing Address and ZIP Code  
UAW V CAP  
8000 E. Jefferson  
Detroit MI 48214

Receipt For:  Primary  General  
 Other (specify):

Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	5/13/97	500.00
Occupation		
Aggregate Year-to-Date	> \$500	

D. Full Name, Mailing Address and ZIP Code  
United Mine Workers of A. Intl U  
900 15th St. NW  
Washington DC 20005

Receipt For:  Primary  General  
 Other (specify):

Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	5/13/97	500.00
Occupation		
Aggregate Year-to-Date	> \$500	

E. Full Name, Mailing Address and ZIP Code  
United Tech Corp PAC  
1401 Eye St. NW, Ste 700  
Washington DC 20005

Receipt For:  Primary  General  
 Other (specify):

Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	4/23/97	500.00
Occupation		
Aggregate Year-to-Date	> \$500	

F. Full Name, Mailing Address and ZIP Code  
Wachovia Bank of NC Emp PAC  
P.O. Box 27886  
Raleigh, NC 27611

Receipt For:  Primary  General  
 Other (specify):

Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	2/24/97	500.00
Occupation		
Aggregate Year-to-Date	> \$500	

G. Full Name, Mailing Address and ZIP Code  
Westinghouse PO1 Part. Prg  
11 Stanwix St.  
Pittsburgh PA 15222

Receipt For:  Primary  General  
 Other (specify):

Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	4/23/97	500.00
Occupation		
Aggregate Year-to-Date	> \$500	

SUBTOTAL of Receipts This Page (optional) ..... 3,500.00

TOTAL This Period (last page this line number only) ..... 42,800.00



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 14

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)  
**Hefner for Congress**

<b>A. Full Name, Mailing Address and ZIP Code</b> Campaign Group 1600 Locust St. Philadelphia PA 19103	Name of Employer Refund of Dpst	Date (month, day, year) 3/26/97 3/26/97	Amount of Each Receipt this Period 1,275.00 1,052.17
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <b>96</b> <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$ 2327.17	

<b>B. Full Name, Mailing Address and ZIP Code</b> Internal Revenue Service P.O. Box 149195 Austin TX 78714-9195	Name of Employer rfund of Overpymnt	Date (month, day, year) 5/19/97	Amount of Each Receipt this Period 390.79
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <b>96</b> <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$ 390.79	

<b>C. Full Name, Mailing Address and ZIP Code</b>	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 > \$	

<b>D. Full Name, Mailing Address and ZIP Code</b>	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 > \$	

<b>E. Full Name, Mailing Address and ZIP Code</b>	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 > \$	

<b>F. Full Name, Mailing Address and ZIP Code</b>	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 > \$	

<b>G. Full Name, Mailing Address and ZIP Code</b>	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)

2,717.96

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 3  
FOR LINE NUMBER 17

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)  
Hefner for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Alltel Mobile P.O. Box 8024 Little Rock AR 72203-8024	Mobile Service	2/8/97	183.94
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3&4/97	122.85
	<input type="checkbox"/> Other (specify)	5&6/97	122.22
B. Full Name, Mailing Address and ZIP Code David Andrukitis Inc. 50 E St., SE Washington DC 20003	Printing	3/6/97	761.40
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3/25/97	220.59
	<input type="checkbox"/> Other (specify)	4/24/97	298.81
C. Full Name, Mailing Address and ZIP Code Angoss Intl Ltd 34 St Patrick St., Ste 200 Toronto Canada	Software upgrade	1/31/97	313.40
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code Cabarrus Cty Tax Collector P.O. Box 707 Concord, NC 28025-0707	Camp Veh Tax	6/27/97	233.38
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code Cecil's Exxon Servicenter P.O. Box 406 Concord, NC 28026-0406	Travel	1/23/97	61.86
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	2/24/97	76.60
	<input type="checkbox"/> Other (specify)	5/19/97	24.50
		6/6/97	40.60
F. Full Name, Mailing Address and ZIP Code Chevy Chase FSB P.O. Box 17074 Baltimore MD 21203-7079	Camp Veh Pymnt	1/23/97	744.27
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3&4/97	1,142.38
	<input type="checkbox"/> Other (specify)	5&6/97	1,148.38
G. Full Name, Mailing Address and ZIP Code CT Communications Inc. (Formerly Concord Tele. Co) P.O. Box 96010 Charlotte, NC 28296-0010	Service	1&2/97	108.75
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3&4/97	99.91
	<input type="checkbox"/> Other (specify)	5/97	47.74
H. Full Name, Mailing Address and ZIP Code Democratic Congressional Camp Comm (In Kind) 430 S. Capitol St. Washington DC 20003	Research Material	3/26/97	300.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code Gary's Bar-B-Q 620 N. Hwy 29 China Grove NC 28023	Fund Raiser	6/30/97	3,445.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

9,496.58

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 2 OF 3  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)  
Hefner for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Congressman Hefner 245-3 Country Club Dr. NE Concord, NC 28025	Receipted Travel Expenses	4/22/97	234.60
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	4/22/97	87.20
	<input type="checkbox"/> Other (specify)	6/9/97	356.30
Congressman Hefner Same as Above	Out of Pocket Travel Exp	1&2/97	670.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3&4/97	430.00
	<input type="checkbox"/> Other (specify)	5&6/97	650.00
Internal Revenue Service Memphis TN 37501	941 Tax Opst	1&2/97	601.70
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3&4/97	537.28
	<input type="checkbox"/> Other (specify)	5&6/97	566.42
NC Dept of Revenue P.O. Box 2500 Raleigh NC 27640-0615	Taxes	1/97	390.74
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3/1/97	8.84
	<input type="checkbox"/> Other (specify)	4/3/97	174.80
Paul B. Williams 1035 Winston St. Greensboro, NC 27405	Camp Eqpmnt	1/30/97	369.94
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
Rowan Cty Chamber of Commerce P.O. Box 559 Salisbury, NC 28145-0559	Dues	1/23/97	230.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
Schneiders 300 Mass Ave NE Washington DC 20003	F.R. Refrshmnt	4/14/97	960.88
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
Gail Stahr 763 Gladden Pl NW Concord, NC 28027	Salary	1&2/97	1,923.16
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3&4/97	1,861.76
	<input type="checkbox"/> Other (specify)	5&6/97	1,904.68
Mike Stain 4105 Stratten Rd. Temple Hills MD 20748	F.R. Entertainment	4/14/97	600.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional) ...

12,558.30

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 **3**  
FOR LINE NUMBER **17**

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NAME OF COMMITTEE (in Full)

**Hefner for Congress**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tarheel Motors of Reidsville P.O. Box 600 Reidsville NC 27323.	Camp Veh Downpymnt & Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	1/30/97 4/30/97 5/20/97	5,185.30 24.89 91.85
B. Full Name, Mailing Address and ZIP Code United Cabarrus Ins. Agency P.O. Box 1049 Concord, NC 28026-1049	Purpose of Disbursement Camp Veh Ins. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	4/30/97	1,456.14
C. Full Name, Mailing Address and ZIP Code US Postmaster	Purpose of Disbursement Pstg & PO Box Fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	2/28/97 3/24/97 4/30/97	480.00 100.00 40.00
D. Full Name, Mailing Address and ZIP Code Wheaton Party Rental 4229 Howard Ave Kensington, MD 20895	Purpose of Disbursement E.R. Tent Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	4/14/97	428.75
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) .....			7,806.93
TOTAL This Period (last page this file number only) .....			29,861.81

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)  
**Befner for Congress**

A. Full Name, Mailing Address and ZIP Code  
**Sanchez Recount Fund  
38 Ivy St  
Washington, DC 20003**

Purpose of Disbursement  
**Contribution**

Date (month, day, year)  
**6/5/97**

Amount of Each Disbursement This Period  
**500.00**

Disbursement for:  Primary  General  
 Other (specify)

B. Full Name, Mailing Address and ZIP Code  
**Cabararus Cty Demo Party  
3569 Chelwood Dr.  
Concord, NC 28027**

Purpose of Disbursement  
**Contribution**

Date (month, day, year)  
**6/21/97**

Amount of Each Disbursement This Period  
**250.00**

Disbursement for:  Primary  General  
 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:  Primary  General  
 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:  Primary  General  
 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:  Primary  General  
 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:  Primary  General  
 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:  Primary  General  
 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:  Primary  General  
 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:  Primary  General  
 Other (specify)

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

**750.00**

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

Name of Committee (in Full) <b>Hefner for Congress</b>	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <b>Chevy Chase FSB</b> <b>P.O. Box 17074</b> <b>Baltimore MD 21203-7079</b>  <b>Loan #110648439</b>	37,213.50		37,213.50	-0-
Nature of Debt (Purpose): <b>Camp Veh Loan (traded)</b>				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <b>Chevy Chase FSB</b> <b>Same as Above</b>	-0-	34,271.40	2,284.76	31,986.64
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				31,986.64

**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.

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED <i>7-28-97</i>
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
	and/or DATE OF RECEIPT
<i>JMG</i>	<i>8-2-97</i>
PREPARED	DATE PREPARED