

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
2415 BOSTON

FEB 20 12 14 PM '97

1. NAME OF COMMITTEE (in full) AT & T PAC		2. FEC IDENTIFICATION NUMBER C00185124
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 295 North Maple Avenue		
CITY, STATE and ZIP CODE Banking Ridge, NJ 07920	3. <input checked="" type="checkbox"/> 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

- Twelfth day report preceding _____
(Type of Election)
election on _____ in the State of _____
 Thirtieth day 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 <u>01/01/97</u> through <u>01/31/97</u>		
6. (a) Cash on Hand January 1, 1997		\$ 224,831.13
(b) Cash on Hand at Beginning of Reporting Period.....	\$ 224,831.13	
(c) Total Receipts (from line 1B).....	\$ 71,664.62	\$ 71,664.62
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	\$ 296,495.75	\$ 296,495.75
7. Total Disbursements (from Line 3D).....	\$ 59,387.69	\$ 59,387.69
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))..	\$ 237,108.06	\$ 237,108.06
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	\$ 0.00	For further information: 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).....	\$ 0.00	

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
Patricia J. Calvin - Assistant Treasurer

Signature of Treasurer
Patricia J. Calvin

Date
2/20/97

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 9/93)

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised (1/1/91)

NAME OF COMMITTEE AT & T PAC	REPORT COVERING PERIOD	
	FROM: 01/01/97	TO: 01/31/97
	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (Use Schedule A).....	965.00	965.00
ii. Unitemized.....	69,588.00	69,588.00
iii. Total.....(add i and ii) >	70,553.00	70,553.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	0.00	0.00
d. Total Contributions.....(add all i, b and c) >	70,553.00	70,553.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1,111.62	1,111.62
18. Transfers from Nonfederal Account for Joint Activity.....	0.00	0.00
19. Total Receipts.....(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	71,664.62	71,664.62
20. Total Federal Receipts.....(subtract line 18 from line 19) >	71,664.62	71,664.62
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share.....	0.00	0.00
ii. Non-Federal Share.....	0.00	0.00
b. Other Federal Operating Expenditures.....	180.69	180.69
c. Total Operating Expenditures.....(Add a i, all, and b) >	180.69	180.69
22. Transfers to Affiliated/Other Party Committees.....	24,500.00	24,500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28,000.00	28,000.00
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees.....	6,707.00	6,707.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (Such As PACs).....	0.00	0.00
d. Total Contribution Refunds.....(Add a, b, and c) >	6,707.00	6,707.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements.....(Add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	59,387.69	59,387.69
31. Total Federal Disbursements.....(Subtract line 21 aii from line 30) >	59,387.69	59,387.69
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans)(from line 11d).....	70,553.00	70,553.00
33. Total Contribution Refunds (from line 28d).....	6,707.00	6,707.00
34. Net Contributions (Other than loans)(subtract line 33 from 32).....	63,846.00	63,846.00
35. Total Federal Operating Expenditures.....(add 21 ai and 21 b) >	180.69	180.69
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures.....(subtract line 36 from 35) >	180.69	180.69

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)
AT & T PAC

A. Full Name, Mailing Address and Zip Code ROBERT ALLEN 60 STEWART STREET SHORT HILLS, NJ 07078	Name of Employer AT&T Communications	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 300.00 (\$300.00 Monthly)
	Occupation Chairman And CEO	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 300.00		
B. Full Name, Mailing Address and Zip Code JAMES J MEENAN 100 SOUTHGATE PKWY RM# 2G13A MORRISTOWN, NJ 07960	Name of Employer AT&T Communications	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 250.00 (\$250.00 Monthly)
	Occupation _____	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 250.00		
C. Full Name, Mailing Address and Zip Code GERALD M LOWRIE 6424 WINDERMERE CIRCLE ROCKVILLE, MD 20852	Name of Employer AT&T Communications	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 415.00 (\$415.00 Monthly)
	Occupation President	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 415.00		
D. Full Name, Mailing Address and Zip Code _____	Name of Employer _____	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation _____	_____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
E. Full Name, Mailing Address and Zip Code _____	Name of Employer _____	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation _____	_____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
F. Full Name, Mailing Address and Zip Code _____	Name of Employer _____	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation _____	_____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
G. Full Name, Mailing Address and Zip Code _____	Name of Employer _____	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation _____	_____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional).....>	965.00
TOTAL this Period (Last page this line number only).....>	965.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in full)
AT & TPAC

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
The Northern Trust Company 50 South LaSalle Street Chicago, IL 60675		01/31/97	1,080.27
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation		
Aggregate Year-to-date > \$		1,111.62	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional).....	>	1,080.27
TOTAL this Period (Last page this line number only).....	>	1,080.27

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER		
22		

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)
AT & T PAC

A. Full Name, Mailing Address and Zip Code AT&T PAC - New York 32 Avenue of the Americas New York, NY 1013	Purpose of Disbursement AT&T PAC - New York Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997	Date (Month day, Year) 01/21/97	Amount of Each Disb. this Period 12,000.00
B. Full Name, Mailing Address and Zip Code AT&T PAC - Missouri/Kansas 919 Congress Avenue, Suite 1500 Austin, TX 78701	Purpose of Disbursement AT&T PAC - Missouri/Kansas Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997	Date (Month day, Year) 01/21/97	Amount of Each Disb. this Period 5,000.00
C. Full Name, Mailing Address and Zip Code AT&T PAC Pennsylvania 208 North Third Street, Suite 220 Harrisburg, PA 17101	Purpose of Disbursement AT&T PAC - Pennsylvania Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997	Date (Month day, Year) 01/21/97	Amount of Each Disb. this Period 5,000.00
D. Full Name, Mailing Address and Zip Code AT&T PAC - Tennessee/Kentucky 1200 Peachtree Street, N.W., Room 4062 Atlanta, GA 30309	Purpose of Disbursement AT&T PAC - Tennessee/Kentucky Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997	Date (Month day, Year) 01/08/97	Amount of Each Disb. this Period 2,500.00
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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional).....>	24,500.00
TOTAL this Period (Last page this line number only).....>	24,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
AT & T PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Chris Cannon for Congress P.O. Box 711 Provo, UT 84603-0711	Chris Cannon, U.S. HOUSE 3rd UT Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) 1996 General Debt Retirement	01/21/97	2,000.00
Friends of Max Cleland P.O. Box 7843 Atlanta, GA 30357	Cleland, U.S. SENATE GA Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) 1996 General Debt Retirement	01/27/97	1,000.00
DeGette for Congress 770 Grant Street Suite 218 Denver, CO 80203	Diana DeGette, U.S. HOUSE 1st CO Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) 1996 General Debt Retirement	01/21/97	2,000.00
Democratic Senatorial Campaign Committee 430 S. Capitol Street, SE Washington, DC 20003	Democratic Senatorial Campaign Committee Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997	01/27/97	15,000.00
Dan Burton For Congress P.O. Box 50593 Indianapolis, IN 46240	Daniel Burton, U.S. HOUSE 6th IN Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	01/27/97	2,000.00
Gene Green Congressional Campaign P.O. Box 16128 Houston, TX 77222-6128	Gene Green, U.S. HOUSE 29th TX Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	01/21/97	2,000.00
Bob Barr For Congress Box 4323 Marietta, GA 30061	Bob Barr, U.S. HOUSE 7th GA Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) 1996 General Debt Retirement	01/27/97	1,000.00
Tom Sawyer Committee Box 2884 Washington, DC 20013	Tom Sawyer, U.S. HOUSE DC Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) 1996 General Debt Retirement	01/27/97	1,000.00
Citizens For Arlen Specter Fifth & Chestnut St. Ste. 715 Philadelphia, PA 19106	Arlen Specter, U.S. SENATE PA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 2000	01/27/97	1,000.00

SUB TOTAL of Disbursements this page (Optional).....> 27,000.00

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 2 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
AT & TPAC

A. Full Name, Mailing Address and Zip Code Helms For Senate P O Box 177000 Raleigh, NC 27619	Purpose of Disbursement Jesse Helms, U.S. SENATE NC Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) 1996 General Debt Retirement	Date (Month day, Year) 01/27/97	Amount of Each Disb. this Period 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional).....> 1,000.00

TOTAL this Period (Last page this line number only).....> 28,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
AT & T PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Raymond Brenner 444 East 82nd Street New York, NY 10028	REFUND Raymond Brenner Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	01/21/97	1,200.00
Melvin Cohen 188 High Tor Drive Watchung, NJ 07060	REFUND Melvin Cohen Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	01/21/97	495.00
Brian Fluck 25335 Marsh Landing Ponte Vedra Beach, FL 32082	REFUND Brian Fluck Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	01/21/97	300.00
Robert Dawson 10 Meadowbrook Road Chester, NJ 07930	REFUND Robert Dawson Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	01/21/97	240.00
James Davis 6501 Anna Maria Court McLean, VA 22101	REFUND James Davis Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	01/21/97	360.00
James Armstrong 9 Bittle Court Martinsville, NJ 08836	REFUND James Armstrong Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	01/21/97	240.00
David Feldman One Oak Way #4cc112 Berkeley Heights, NJ 07922	REFUND David Feldman Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	01/21/97	240.00
Morley A. Winograd 2165 Canyon Rd Arcadia, CA 91006	REFUND Morley A. Winograd Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	01/21/97	400.00
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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional).....>	3,475.00
TOTAL this Period (Last page this line number only).....>	3,475.00

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

5-20-97

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

5-20-97
DATE PREPARED