

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 29 11 36 AM '97

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
 C00125716 060297 P 254
 MR H B HORNER
 FLORIDA ROCK INDUSTRIES INC GO
 OD GOVERNMENT COMMITTEE
 155 EAST 21ST STREET/PO BOX 46
 JACKSONVILLE FL 32206

2. FEC IDENTIFICATION NUMBER
 CO 012716

3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M) (prior to January 1, 1994)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

- 12-Day Pre-Election Report for the _____
 (Type of Election)
 election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
 on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	01-01-97 through 06-30-97		
6. (a) Cash on Hand January 1, 1997			\$ 23,251.02
(b) Cash on Hand at Beginning of Reporting Period		\$ 23,251.02	
(c) Total Receipts (from Line 19)		\$ 5,324.29	\$ 5,324.29
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 28,575.31	\$ 28,575.31
7. Total Disbursements (from Line 30)		\$ 10,061.02	\$ 10,061.02
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 18,514.29	\$ 18,514.29
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ -0-	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ -0-	
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 H. B. Horner			
Signature of Treasurer H.B. Horner			Date 7/22/97

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
Florida Rock Industries, Inc. Good Government Committee

REPORT COVERING PERIOD
FROM 01-01-97 TO 06-30-97

	COLUMN A Total This Period	COLUMN B Calendar Year	
I Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees	\$ 4,068.48	\$ 4,068.48	11(a)
i. Itemized (use Schedule A)	1,147.97	1,147.97	11(a)(i)
ii. Unitemized			11(a)(ii)
iii. Total (add i and ii) >	5,216.45	5,216.45	11(b)
b. Political Party Committees			11(c)
c. Other Political Committees (such as PACs)			11(d)
d. Total Contributions (add a ii, b and c) >	5,216.45	5,216.45	11(e)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	107.84	107.84	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 16, 17, and 18) >	5,324.29	5,324.29	19
20. Total Federal Receipts (subtract line 18 from line 19) >	5,324.29	5,324.29	20
II Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >			21
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	10,000.00	10,000.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >	61.02	61.02	28
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	10,061.02	10,061.02	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	10,061.02	10,061.02	31
III Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	5,216.45	5,216.45	32
33. Total Contribution Refunds (from line 28d)	-0-	-0-	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	5,216.45	5,216.45	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	-0-	-0-	35
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37. Net Operating Expenditures (subtract line 36 from 35) >	-0-	-0-	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2

FOR LINE NUMBER 11(a)(i)

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)

Florida Rock Industries, Inc. Good Government Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
J. D. Baker II P. O. Box 4667 Jacksonville, FL 32201 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Florida Rock Industries, Inc.	01-24-97	\$ 48.08
		02-14-97	48.08
		03-20-97	48.08
	Occupation President	04-23-97	48.08
		05-06-97	48.08
		06-13-97	48.08
Aggregate Year-to-Date >		\$ 288.49	
B. Full Name, Mailing Address and ZIP Code A. R. Carpenter 500 Water Street Jacksonville, FL 32202 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	CSX Transportation, Inc.	01-24-97	\$ 40.00
		02-14-97	40.00
		03-20-97	40.00
		04-23-97	40.00
	Occupation President	05-06-97	40.00
		06-13-97	40.00
Aggregate Year-to-Date >		\$ 240.00	
C. Full Name, Mailing Address and ZIP Code S. R. Hays P. O. Box 4667 Jacksonville, FL 32201 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Florida Rock Industries, Inc.	04-23-97	\$ 300.00
	Occupation Vice President		
	Aggregate Year-to-Date >		\$ 300.00
D. Full Name, Mailing Address and ZIP Code H. B. Romer P. O. Box 4667 Jacksonville, FL 32201 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Florida Rock Industries, Inc.	01-24-97	\$ 50.00
		02-14-97	50.00
		03-20-97	50.00
		04-23-97	50.00
	Occupation Exec. Vice President	05-06-97	50.00
		06-13-97	50.00
Aggregate Year-to-Date >		\$ 300.00	
E. Full Name, Mailing Address and ZIP Code R. G. O'Brien P. O. Box 4667 Jacksonville, FL 32201 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Florida Rock Industries, Inc.	01-24-97	\$ 40.00
		02-14-97	40.00
		03-20-97	40.00
		04-23-97	40.00
	Occupation President	05-06-97	40.00
		06-13-97	40.00
Aggregate Year-to-Date >		\$ 240.00	
F. Full Name, Mailing Address and ZIP Code H. W. Nehilla P. O. Box 725 Springfield, VA 22150 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Florida Rock Industries, Inc.	01-30-97	\$ 500.00
	Occupation President Cardinal Concrete Div.		
	Aggregate Year-to-Date >		\$ 500.00
G. Full Name, Mailing Address and ZIP Code C. E. Render, Jr. P. O. Box 606 Springfield, VA 22150 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Florida Rock Industries, Inc.	02-05-97	\$1,000.00
	Occupation President Northern Concrete Div.		
	Aggregate Year-to-Date >		\$ 1,000.00

SUBTOTAL of Receipts This Page (optional) \$2,868.48

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
 Florida Rock Industries, Inc. Good Government Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
C. J. Shepherdson, Sr. P. O. Box 606 Springfield, VA 22150	Florida Rock Industries, Inc.	04-23-97	\$ 1,200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Chairman Northern Concrete Div.	Aggregate Year-to-Date: \$ 1,200.00	
B. 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: \$	
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)	\$ 1,200.00
TOTAL This Period (last page this line number only)	\$ 4,068.48

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)

Florida Rock Industries, Inc. Good Government Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barnett Bank 50 North Laura Street Jacksonville, FL 32231		01-31-97	\$ 20.64
		02-28-97	19.76
	Occupation	03-31-97	17.54
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): interest	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barnett Bank 50 North Laura Street Jacksonville, FL 32231		04-30-97	\$ 16.69
		05-30-97	16.46
	Occupation	06-30-97	16.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): interest	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
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
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
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
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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) \$ 107.84

TOTAL This Period (last page this line number only) \$ 107.84

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)

Florida Rock Industries, Inc. Good Government Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Bob Graham 524 Hart Senate Office Bldg. Washington, D.C. 20510	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02-03-97	\$ 5,000.00
B. Full Name, Mailing Address and ZIP Code Tom Davis for Congress 6429 Downing Court Annandale, VA 22003	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02-03-97	\$ 1,000.00
C. Full Name, Mailing Address and ZIP Code Fowler for Congress P. O. Box 380087 Jacksonville, FL 32205	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02-03-97	\$ 1,000.00
D. Full Name, Mailing Address and ZIP Code MacCollins for Congress P. O. Box 35 Jonesboro, GA 30237	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02-14-97	\$ 500.00
E. Full Name, Mailing Address and ZIP Code The Adam Smith PAC P. O. Box 2392 Tampa, FL 33601	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04-11-97	\$ 2,500.00
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) \$10,000.00

TOTAL This Period (last page this line number only) \$10,000.00

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

First Class Mail

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POSTMARKED

7/24/97

No Postmark

Postmark Illegible

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and Registration

DATE OF RECEIPT

Received from the Senate Office of Public
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

VPU

PREPARER

7/29/97

DATE PREPARED