

CURTIN & STEINGART, P.A.

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8500 NORMANDALE LAKE BOULEVARD
MINNEAPOLIS, MINNESOTA 55437-3822
TELEPHONE: (612) 832-5500
FACSIMILE: (612) 831-0688

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

DEC 10 12 01 PM '96

December 4, 1996

**CERTIFIED MAIL/
RETURN RECEIPT REQUESTED :**

Public Records Office
Federal Election Commission
999 E Street NW
Washington, D.C. 20463

RE: ADVO, Inc. Political Action Committee

Ladies and Gentlemen:

Enclosed for filing with your office on behalf of ADVO, Inc. Political Action Committee please find the Post-General Election Report of Receipts and Disbursements on FEC Form 3X.

Very truly yours,



MICHELE D. SEEHAFER

MDS:cmn
Enclosure

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

Dec 10 12 02 PM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) ADVO, Inc. Political Action Committee a/k/a ADVOPAC		2. FEC IDENTIFICATION NUMBER 0019639
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported One Univac Lane		
CITY, STATE and ZIP CODE Windsor, CT 06095		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1N)		

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	10/17/96	through	11/25/96	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period					
6. (a) Cash on Hand January 1, 19_96					\$ 53,649.10
(b) Cash on Hand at Beginning of Reporting Period				\$ 22,531.69	
(c) Total Receipts (from Line 19)				\$ 4,428.99	\$ 32,252.81
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)				\$ 26,960.68	\$ 85,901.91
7. Total Disbursements (from Line 30)				\$ 2,006.34	\$ 60,947.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))				\$ 24,954.34	\$ 24,954.34
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)				\$ 0.00	
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.

For further information contact:
Federal Election Commission
399 E Street, NW
Washington, DC 20463
Toll Free 800-424-9600
Local 202-219-3420

Type or Print Name of Treasurer
Vincent Giuliano

Signature of Treasurer
Jose Savonata, Asst Treasurer

Date
12/5/96

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437c.

9717									
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FEC FORM 3X
(revised 6/93)

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

(revised 1/1/91)

NAME OF COMMITTEE: **ADVO, Inc. Political Action Committee a/k/a ADVOPAC**

REPORT COVERING PERIOD FROM: **10/1/96** TO: **11/25/96**

		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)	2,764.00	11,372.00	11(a)(i)
ii.	Unitemized	1,627.18	20,128.35	11(a)(ii)
iii.	Total	4,391.18	31,500.35	11(a)(i)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions	4,391.18	31,500.35	11(d)
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.)	37.81	752.46	17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts	4,428.99	32,252.81	19
20.	Total Federal Receipts	4,428.99	32,252.81	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule HA)			
i.	Federal Share			21(a)(i)
ii.	Non-Federal Share			21(a)(ii)
b.	Other Federal Operating Expenditures	6.34	697.57	21(b)
c.	Total Operating Expenditures	6.34	697.57	21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	2,000.00	60,250.00	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.	Individuals/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			28(d)
29.	Other Disbursements			29
30.	Total Disbursements	2,006.34	60,947.57	30
31.	Total Federal Disbursements	2,006.34	60,947.57	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	4,391.18	31,500.35	32
33.	Total Contribution Refunds (from line 28d)	0.00	0.00	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	4,391.18	31,500.35	34
35.	Total Federal Operating Expenditures	6.34	697.57	35
36.	Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37.	Net Operating Expenditures	6.34	697.57	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **17**

OTHER FEDERAL RECEIPTS

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)

ADVO, Inc. Political Action Committee, aka ADVOPAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fleet Bank One Constitution Plaza Hartford, CT 06115-1600	savings account interest income	10/31/96	\$37.81
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$752.46
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)

\$37.81

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM INDIVIDUALS

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

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

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NAME OF COMMITTEE (in Full)

ADVO, Inc. Political Action Committee, aka ADVOPAC

A. Full Name, Mailing Address and ZIP Code Julie Abraham 14 Old Mill Drive Canton, CT 06022 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$48 (\$12 per pay period)
	Occupation VP Shared Serv.	Aggregate Year-to-Date > \$ 276	
B. Full Name, Mailing Address and ZIP Code Jean Augin 3524 East 2nd Street Long Beach, CA 90803 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$40 (\$10 per pay period)
	Occupation RVP	Aggregate Year-to-Date > \$ 230	
C. Full Name, Mailing Address and ZIP Code Wanda Artus-Cooper 15 Church Place Holliston, MA 01746 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$56 (\$14 per pay period)
	Occupation Manager	Aggregate Year-to-Date > \$ 294	
D. Full Name, Mailing Address and ZIP Code Paul Case 40531 Sunset Court Antioch, IL 60002 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$62 (\$15.50 per pay period)
	Occupation Exec	Aggregate Year-to-Date > \$ 356.50	
E. Full Name, Mailing Address and ZIP Code Dan Chilwood 13767 Offutt Drive Carmel, IN 46032 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$40 (\$10 per pay period)
	Occupation Manager	Aggregate Year-to-Date > \$ 230	
F. Full Name, Mailing Address and ZIP Code James Conber 2104 Grandview Avenue Manhattan Beach, CA 90266 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$40 (\$10 per pay period)
	Occupation VP	Aggregate Year-to-Date > \$ 230	
G. Full Name, Mailing Address and ZIP Code Peter Corrao 3 Kimberly Drive Manchester, CT 06040 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$100 (\$25 per pay period)
	Occupation President	Aggregate Year-to-Date > \$ 575.00	

SUBTOTAL of Receipts This Page (optional)

\$386

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 7
FOR LINE NUMBER 11(a)(1)

CONTRIBUTIONS FROM INDIVIDUALS

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NAME OF COMMITTEE (in Full)
ADVOC, Inc. Political Action Committee, aka ADVOPAC

A. Full Name, Mailing Address and ZIP Code J.C. Dennis 23 Sarah Drive Avon, CT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$50 (\$12.50 per pay period)
	Occupation VP	Aggregate Year-to-Date \$	\$287.50
B. Full Name, Mailing Address and ZIP Code Tom Perelchak 92 Quail Run Road Suffield, CT 06078 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$48 (\$12 per pay period)
	Occupation VP	Aggregate Year-to-Date \$	\$276
C. Full Name, Mailing Address and ZIP Code Brian Gallagher 41 Fawnbrook Lane Simsbury, CT 06070 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$44 (\$11 per pay period)
	Occupation Manager	Aggregate Year-to-Date \$	\$246
D. Full Name, Mailing Address and ZIP Code Vincent Giuliano 26 Hollowbrook Road Windsor, CT 06095 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$80 (\$20 per pay period)
	Occupation VP	Aggregate Year-to-Date \$	\$460
E. Full Name, Mailing Address and ZIP Code Gayle Gecco 675 Sky Hy Circle Lafayette, CA 94549 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$36 (\$9 per pay period)
	Occupation RVP	Aggregate Year-to-Date \$	\$207
F. Full Name, Mailing Address and ZIP Code Robert Hassinger 12 Rosewood Drive Prospect, CT 06712 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$42 (\$10.50 per pay period)
	Occupation Director	Aggregate Year-to-Date \$	\$241.50
G. Full Name, Mailing Address and ZIP Code John Healy 91 Green Hill Road Lougheed, MA 01106 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$76 (\$19 per pay period)
	Occupation Director	Aggregate Year-to-Date \$	\$374

\$376

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM INDIVIDUALS

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

PAGE 3 OF 7

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (as Full) **State Federal Action Committee, aka ADVOPAC**

<p>A. Full Name, Mailing Address and ZIP Code Dario Reimessey 6 Whitewater Turn Simsbury, CT 06081</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation Asst. Gen. Counsel</p> <p>Aggregate Year-to-Date \$ 230.00</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$40 (\$10 per pay period)</p>
<p>B. Full Name, Mailing Address and ZIP Code Eric Hoy 5 Cardinal Road Simsbury, CT 06070</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation VP</p> <p>Aggregate Year-to-Date \$ 556.50</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$62 (\$15.50 per pay period)</p>
<p>C. Full Name, Mailing Address and ZIP Code Robert Raimerschen 204 Parade Hill Road New Canaan, CT 06840</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation CEO</p> <p>Aggregate Year-to-Date \$ 1,690</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$300 (\$75 per pay period)</p>
<p>D. Full Name, Mailing Address and ZIP Code Verdon Kelly 120 Hitchcock Court Cheshire, CT 06410</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation Manager</p> <p>Aggregate Year-to-Date \$ 230.00</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$40 (\$10 per pay period)</p>
<p>E. Full Name, Mailing Address and ZIP Code Richard Kinch 48 Spruce Run Ramsey, NJ 07446</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation Exec</p> <p>Aggregate Year-to-Date \$ 391.00</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$68 (\$17 per pay period)</p>
<p>F. Full Name, Mailing Address and ZIP Code Rick Kurz 117 Tobys Lane New Canaan, CT 06840</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation Senior VP</p> <p>Aggregate Year-to-Date \$ 230.00</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$40 (\$10 per pay period)</p>
<p>G. Full Name, Mailing Address and ZIP Code Fred Leick 61 College Avenue Annapolis, MD 21401</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation Div. Pres.</p> <p>Aggregate Year-to-Date \$ 460.00</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$80 (\$20 per pay period)</p>

SUBTOTAL of Receipts This Page (optional) **\$630**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM INDIVIDUALS

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

PAGE 4 OF 7

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full) ADVOC, Inc. Political Action Committee, aka ADVOPAC

<p>A. Full Name, Mailing Address and ZIP Code George Lockwood 38 Walnut Street Naugatuck, CT 06770</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation Manager</p> <p>Aggregate Year-to-Date \$ 538</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$60 (\$15 per pay period)</p>
<p>B. Full Name, Mailing Address and ZIP Code Myron Labin 16417 North 55th Place Scottsdale, AZ 85254</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation General Manager</p> <p>Aggregate Year-to-Date \$ 920</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$160 (\$40 per pay period)</p>
<p>C. Full Name, Mailing Address and ZIP Code Richard MacDonnell 10743 Hubbs Station Louisville, KY 40223</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation VP</p> <p>Aggregate Year-to-Date \$ 230</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$40 (\$10 per pay period)</p>
<p>D. Full Name, Mailing Address and ZIP Code Brian Mahoney PO Box 434 Shenrock, NY 10587</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation Manager</p> <p>Aggregate Year-to-Date \$ 230</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$40 (\$10 per pay period)</p>
<p>E. Full Name, Mailing Address and ZIP Code Don McCombs 30 Hickory Hill Simsbury, CT 06070</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation VP</p> <p>Aggregate Year-to-Date \$ 348</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$60 (\$15 per pay period)</p>
<p>F. Full Name, Mailing Address and ZIP Code Debbie Meadows 13539 North 95th Way Scottsdale, AZ 85260</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation Manager</p> <p>Aggregate Year-to-Date \$ 540</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$100 (\$25 per pay period)</p>
<p>G. Full Name, Mailing Address and ZIP Code Stephanie Molnar 6304 Ruritan Drive Columbia, MD 21045</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation RVP</p> <p>Aggregate Year-to-Date \$ 391</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$68 (\$17 per pay period)</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>			\$528
<p>TOTAL This Period (last page this line number only)</p>			

SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM INDIVIDUALS

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

PAGE 5 OF 7
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)
ADVO, Inc. Political Action Committee, aka ADVOPAC

<p>A. Full Name, Mailing Address and ZIP Code Lien Pulex 22041 Grass Valley Mission Viejo, CA</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation RVP</p> <p>Aggregate Year-to-Date \$ 230</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt This Period \$40 (\$10 per pay period)</p>
<p>B. Full Name, Mailing Address and ZIP Code Robert Putnam 653 Kahen Ct Hartland, WI 53029</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation VP</p> <p>Aggregate Year-to-Date \$ 224</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt This Period \$32 (\$8 per pay period)</p>
<p>C. Full Name, Mailing Address and ZIP Code Don Raffalli 7405 West Carmen Avenue Harwood Heights, IL 60656</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation Manager</p> <p>Aggregate Year-to-Date \$ 230</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt This Period \$40 (\$10 per pay period)</p>
<p>D. Full Name, Mailing Address and ZIP Code Lowell Robinson 1 Gold Street #6A Hartford, CT 06103</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation CFO</p> <p>Aggregate Year-to-Date \$ 230</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt This Period \$40 (\$10 per pay period)</p>
<p>E. Full Name, Mailing Address and ZIP Code Jerry Robitaille 21 Brookwood Drive Longmeadow, MA 01106</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$ 230</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt This Period \$40 (\$10 per pay period)</p>
<p>F. Full Name, Mailing Address and ZIP Code Debra Rypkeida 4037 East Bloomfield Road Phoenix, AZ 85032</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation Financial Exec.</p> <p>Aggregate Year-to-Date \$ 230</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt This Period \$40 (\$10 per pay period)</p>
<p>G. Full Name, Mailing Address and ZIP Code Dan Sherr 19 Cook Street Washington Depot, CT 06956</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation VP</p> <p>Aggregate Year-to-Date \$ 460</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt This Period \$80 (\$20 per pay period)</p>

SUBTOTAL of Receipts This Page (optional) \$312

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM INDIVIDUALS

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

PAGE 6 OF 7

FOR LINE NUMBER 11(a)(3)

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 (or Full Name of the Political Action Committee, aka ADVDPAC)

<p>A. Full Name, Mailing Address and ZIP Code Kevin Smith 2683 Alice Way Pinole, CA 94564</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation VP</p> <p>Aggregate Year-to-Date > \$ 220</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt This Period \$40 (\$10 per pay period)</p>
<p>B. Full Name, Mailing Address and ZIP Code John Spatz 1668 Cunningham Est Rd Orlando, FL</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation VP</p> <p>Aggregate Year-to-Date > \$ 22</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt This Period \$56 (\$14 per pay period)</p>
<p>C. Full Name, Mailing Address and ZIP Code David Stigler 25 Ethan Drive Windsor, CT 06095</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation Sr. VP</p> <p>Aggregate Year-to-Date > \$ 230</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt This Period \$40 (\$10 per pay period)</p>
<p>D. Full Name, Mailing Address and ZIP Code Frank Tatz 25085 Rolling Green Barrington, IL 60010</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation General Manager</p> <p>Aggregate Year-to-Date > \$ 675</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt This Period \$120 (\$30 per pay period)</p>
<p>E. Full Name, Mailing Address and ZIP Code Sebastian Iarallo 82 Avondale Road Longmeadow, MA 01006</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation VP</p> <p>Aggregate Year-to-Date > \$ 460</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt This Period \$80 (\$20 per pay period)</p>
<p>F. Full Name, Mailing Address and ZIP Code J. Thomas Van Berken 42 Longview Road Avon, CT 06001</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation Sr. VP</p> <p>Aggregate Year-to-Date > \$ 460</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt This Period \$80 (\$20 per pay period)</p>
<p>G. Full Name, Mailing Address and ZIP Code John Vaughn 24 Elaine Drive Simsbury, CT 06070</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Advo, Inc.</p> <p>Occupation VP</p> <p>Aggregate Year-to-Date > \$ 322</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt This Period \$56 (\$14 per pay period)</p>

SUBTOTAL of Receipts This Page (optional) \$472

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM INDIVIDUALS

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

PAGE 7 OF 7
FOR LINE NUMBER 11(a)(6)

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NAME OF COMMITTEE (in Full)
ADVO, Inc. Political Action Committee, aka ADVOPAC

A. Full Name, Mailing Address and ZIP Code John Wilcox 1826 St. George Road Danville, CA 94526 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc. Occupation Exec. Aggregate Year-to-Date \$ 145	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$60 (\$15 per pay period)
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$60
TOTAL This Period (last page this line number only)	\$2,764

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 23

CONTRIBUTIONS TO FEDERAL CANDIDATES AND OTHER PACs

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)

ADVO, Inc. Political Action Committee, aka ADVOPAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ackerman for Congress 501 Capitol Court NE, Suite 200 Washington DC 20002	Contrib. to Gary Ackerman House Cand., NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/96	-1,000.00 last check dated 3/11/96
Ackerman for Congress 501 Capitol Court NE, Suite 200 Washington DC 20002	Contrib. to Gary Ackerman House Cand., NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/96	\$1,000.00
Al Savi for US Senate 201 N. Wells St., Suite 2002 Chicago, IL 60606	Contrib. to Al Savi Senate Cand., IL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/96	\$1,000.00
Victory USA PO Box 990 Washington DC 20044	Contrib. to Vic Fazio House Cand., CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/96	\$1,000.00
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 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)

\$2,000

S0302

TOTAL This Period (last page this line number only)

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

POSTMARKED

Registered/Certified Mail

POSTMARKED

12-5-96

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

JLS
PREPARED

12-10-96
DATE PREPARED