

CURTIN & STEINGART, P.A. RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

SUITE 900
3300 NORMANDALE LAKE BOULEVARD
MINNEAPOLIS, MINNESOTA 55417-3122
TELEPHONE: (612) 832-3500
FACSIMILE: (612) 832-0088

AUG 1 11 46 AM '97

MICHELE D. SEEHAFFER
(612) 832-0684

July 25, 1997

**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 July 31, 1997 Mid-Year Report of Receipts and Disbursements on FEC Form 3X.

Very truly yours,



MICHELE D. SEEHAFFER

MDS:cmn
Enclosure

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

AUG 1 11 46 AM '97

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
ADVO, Inc. Political Action Committee a/c/a ADVOPAC

ADDRESS (number and street) Check if different than previously reported
One Univac Lane

CITY, STATE and ZIP CODE
Windsor, CT 06095

2. FEC IDENTIFICATION NUMBER
C00196659

3. This committee has qualified as a non-candidate committee. (see FEC FORM 14)

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	COLUMN B
5. Covering Period <u>1/1/97</u> through <u>6/30/97</u>		This Period	Calendar Year-to-Date
6. (a)	Cash on Hand January 1, 19 <u>97</u>		\$28,247.46
(b)	Cash on Hand at Beginning of Reporting Period	\$ 28,247.46	
(c)	Total Receipts (from Line 19)	\$ 14,306.47	\$14,306.47
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 42,553.93	\$42,553.93
7.	Total Disbursements (from Line 30)	\$ 29,290.18	\$29,290.18
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 13,263.75	\$13,263.75
9.	Debits and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 888 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-8420
10.	Debits 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
Vincent Giuliano

Signature of Treasurer
Vincent Giuliano

Date
7/29/97

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 2X

(revised 1/1/81)

NAME OF COMMITTEE ADVO, Inc. Political Action Committee a/k/a ADVOPAC	REPORT COVERING PERIOD FROM 1/1/97 TO: 6/30/97	
I Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	5,670.50	5,670.50
ii. Unitemized	8,444.26	8,444.26
iii. Total	14,114.76	14,114.76
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions	14,114.76	14,114.76
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)	191.71	191.71
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts	14,306.47	14,306.47
20. Total Federal Receipts	14,306.47	14,306.47
II Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share	290.18	290.18
b. Other Federal Operating Expenditures	290.18	290.18
c. Total Operating Expenditures	290.18	290.18
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	29,000.00	29,000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds		
29. Other Disbursements		
30. Total Disbursements	29,290.18	29,290.18
31. Total Federal Disbursements	29,290.18	29,290.18
III Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	14,114.76	14,114.76
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (other than loans)(subtract line 33 from 32)	14,114.76	14,114.76
35. Total Federal Operating Expenditures	290.18	290.18
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00
37. 9720 Total Federal Operating Expenditures	290.18	290.18

SCHEDULE A

**ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS**

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

PAGE 1 OF 3
FOR LINE NUMBER 11(s)(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)

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
Peter Corrao 3 Kimberly Drive Manchester, CT 06040	Advo, Inc.	Twice monthly payroll deduction	\$325 (\$25 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date > \$ \$325	
Vincent Giuliano 26 Hollowbrook Road Windsor, CT 06095	Advo, Inc.	Twice monthly payroll deduction	\$260 (\$20 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Sr. VP	Aggregate Year-to-Date > \$ \$260	
John Healy 91 Green Hill Road Longmeadow, MA 01106	Advo, Inc.	Twice monthly payroll deduction	\$247 (\$19 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Director	Aggregate Year-to-Date > \$ \$247	
Marc Hoy 5 Cardinal Road Simsbury, CT 06070	Advo, Inc.	Twice monthly payroll deduction	\$201.50 (\$15.50 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date > \$ \$201.50	
Robert Kamarschen 204 Parade Hill Road New Canaan, CT 06840	Advo, Inc.	Twice monthly payroll deduction	\$975 (\$75 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CBO	Aggregate Year-to-Date > \$ \$975	
Richard Kinch 48 Spruce Run Ramsey, NJ 07446	Advo, Inc.	Twice monthly payroll deduction	\$221 (\$17 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Exec.	Aggregate Year-to-Date > \$ \$221	
Fred Leick 61 College Avenue Annapolis, MD 21401	Advo, Inc.	Twice monthly payroll deduction	\$260 (\$20 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Div. Pres.	Aggregate Year-to-Date > \$ \$260	

SUBTOTAL of Receipts This Page (optional)

\$2,489.50

TOTAL This Period (last page this line number only)

62245

SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM INDIVIDUALS

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

PAGE 2 OF 3

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)

ADVO, Inc. Political Action Committee, aka ADVOPAC

A. Full Name, Mailing Address and ZIP Code Myron Lubin 16417 North 55th Place Scottsdale, AZ 85254		Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$520 (\$40 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation General Mgr.	Aggregate Year-to-Date \$ 520	
B. Full Name, Mailing Address and ZIP Code Debbie Meadows 13539 North 95th Way Scottsdale, AZ 85260		Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$325 (\$25 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Manager	Aggregate Year-to-Date \$ 325	
C. Full Name, Mailing Address and ZIP Code Stephanie Molnar 6304 Raritan Drive Columbia, MD 21045		Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$221 (\$17 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation RVP	Aggregate Year-to-Date \$ 221	
D. Full Name, Mailing Address and ZIP Code Gary Mulloy 28 Cary Lane Bloomfield, CT 06002		Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$975 (\$75 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	Aggregate Year-to-Date \$ 975	
E. Full Name, Mailing Address and ZIP Code Lowell Robinson One Gold Street, #6A Hartford, CT 06103		Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$230 (\$10 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation CFO	Aggregate Year-to-Date \$ 230	
F. Full Name, Mailing Address and ZIP Code Dan Sherr 19 Cook Street Washington Depot, CT 06956		Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$260 (\$20 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation VP	Aggregate Year-to-Date \$ 260	
G. Full Name, Mailing Address and ZIP Code Frank Talz 25085 Rolling Green Barrington, IL 60010		Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$390 (\$30 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation General Mgr.	Aggregate Year-to-Date \$ 390	

SUBTOTAL of Receipts This Page (optional)

\$2,921

TOTAL This Period (last page this line number only)
 C2245

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 3
FOR LINE NUMBER 11(a)(i)

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 Sebastian Tarallo 82 Avondale Road Longmeadow, MA 01006 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Advo, Inc. Occupation VP Aggregate Year-to-Date > \$	Date (month, day, year) Twice monthly payroll deduction \$260	Amount of Each Receipt this Period \$260 (\$20 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)	\$260
TOTAL This Period (last page this line number only)	\$5,670.50

SCHEDULE A

ITEMIZED RECEIPTS

OTHER FEDERAL 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)
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	1/31/97	\$33.97
	interest income	2/28/97	\$31.24
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	3/31/97	\$38.96
		Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code Fleet Bank One Constitution Plaza Hartford, CT 06115-1600	savings account	4/30/97	\$31.25
	interest income	5/31/97	\$31.67
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	6/30/97	\$24.62
		Aggregate Year-to-Date > \$	\$191.71
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)
9723

\$191.71

SCHEDULE B

ITEMIZED DISBURSEMENTS

CONTRIBUTIONS TO FEDERAL CANDIDATES AND OTHER PACs

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)

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
Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003	Contrib. to DCCC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/7/97	\$5,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democratic Senatorial Campaign Committee 430 South Capitol Street SE Washington, DC 20003	Contrib. to DSCC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/27/97 6/10/97	\$2,500.00 \$2,500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
New Republican Majority Fund 3001 Park Center Drive, Ste. 1105 Alexandria, VA 22302	Contrib. to New Rep. Majority Fund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/28/97	\$5,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Barbara Kennelly for Congress PO Box 2884 Washington, DC 20013	Contrib. to Barbara Kennelly House CT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/5/97	\$ 500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Chris Dodd 203 C Street NE Washington, DC 20013	Contrib. to Chris Dodd, Senate CT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/9/97	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ackerman for Congress 1645 South Burton Street Arlington, VA 22204	Contrib. to Gary Ackerman, House NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/9/97	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hoyer for Congress Committee 7905 Malcolm Road, Suite 102 Clayton, MD 20735	Contrib. to Steny Hoyer, House MD Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/29/97	\$ 500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
1997 RNC Annual Gala 310 First Street SE Washington, DC 20003	Contrib. to RNC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/97	\$5,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for John Olver for Congress 38 Ivy Street SE Washington, DC 20003	Contrib. to John Olver, House MA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/9/97	\$ 500.00

SUBTOTAL of Disbursements This Page (optional)

\$23,500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

CONTRIBUTIONS TO FEDERAL CANDIDATES AND OTHER PACs

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)

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
A Lot of People Supporting T. Daschle 424 C Street NE Washington, DC 20002	Contrib. to Tom Daschle, Senate SD Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/10/97	\$1,000.00
Bennett '98 Committee PO Box 8841 Falls Church, VA 22041	Contrib. to Bob Bennett, Senate UT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/18/97	\$1,000.00
C. Full Name, Mailing Address and ZIP Code FIGHTPAC 900 Second Street NE, Suite 114 Washington, DC 20002	Purpose of Disbursement Contrib. to FIGHTPAC Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/19/97	\$2,500.00
D. Full Name, Mailing Address and ZIP Code Fazio for Congress PO Box 2884 Washington, DC 20013	Purpose of Disbursement Contrib. to Vic Fazio, House CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/20/97	\$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)

\$5,500.00

TOTAL This Period (last page this line number only)

\$29,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 21b

OPERATING EXPENDITURES

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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
Internal Revenue Service Andover, MA 05501	1996 Income Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/17/97	\$258.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$258

