

CURTIN & STEINGART, P.A.

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8500 NORMANDALE LAKE BOULEVARD
MINNEAPOLIS, MINNESOTA 55437-3222
TELEPHONE: (612) 832-5100
FACSIMILE: (612) 831-0084

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

JUL 19 1 57 PM '96

MICHELE D. SEEHAFFER
(612) 832-0684

July 12, 1996

**CERTIFIED MAIL/
RETURN RECEIPT REQUESTED**

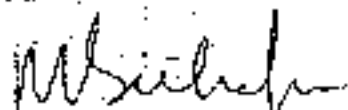
Public Records Office
Federal Election Commission
999 E Street NW
Washington, D.C. 20463

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 July 15, 1996 Quarterly 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

JUL 19 1 57 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 C00196659
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported One Univac Lane	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Windsor, CT 06095	

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:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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	4/1/96	through	6/30/96	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period					
6. (a) Cash on Hand January 1, 19 <u>96</u>					\$ 53,649.10
(b) Cash on Hand at Beginning of Reporting Period				\$ 42,282.87	
(c) Total Receipts (from Line 19)				\$ 8,958.57	\$ 20,484.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)				\$ 51,241.44	\$ 74,133.27
7. Total Disbursements (from Line 30)				\$ 23,010.85	\$ 45,902.68
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))				\$ 28,230.59	\$ 28,230.59
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)				\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3423
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 Vincent Gubbano	Date 7/12/96
Signature of Treasurer 	

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

**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 4/1/96 TO 6/30/96	
		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)	3,105.00	4,465.00	11(a)(i)
ii. Unitemized	5,618.44	15,436.35	11(a)(ii)
iii. Total	8,723.44	19,901.35	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions	8,723.44	19,901.35	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.)	235.13	582.82	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts	8,958.57	20,484.17	19
20. Total Federal Receipts	8,958.57	20,484.17	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	10.85	652.68	21(b)
c. Total Operating Expenditures	10.85	652.68	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	23,000.00	45,250.00	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. 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			28(d)
29. Other Disbursements			29
30. Total Disbursements	23,010.85	45,902.68	30
31. Total Federal Disbursements	23,010.85	45,902.68	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	8,723.44	19,901.35	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	8,723.44	19,901.35	34
35. Total Federal Operating Expenditures	10.85	652.68	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
9711	10.85	652.68	36
37. Net Operating Expenditures			37

SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM INDIVIDUALS

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

PAGE 1 OF 1

FOR LINE NUMBER 11(B)(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 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 \$108.50 (\$15.50 per pay period)
	Occupation Exec Aggregate Year-to-Date \$ 201.50		
B. 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 \$175 (\$25 per pay period)
	Occupation President Aggregate Year-to-Date \$ 25.00		
C. Full Name, Mailing Address and ZIP Code Joseph Durrett 97 Mallard Drive Avon, CT 06001 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 \$350 (\$50 per pay period)
	Occupation President & COO Aggregate Year-to-Date \$ 625.00		
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 \$140 (\$20 per pay period)
	Occupation VP Aggregate Year-to-Date \$ 260.00		
E. Full Name, Mailing Address and ZIP Code Marc Hoy 5 Cardinal Road 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 \$108.50 (\$15.50 per pay period)
	Occupation VP Aggregate Year-to-Date \$ 201.50		
F. Full Name, Mailing Address and ZIP Code Robert Kamerschen 204 Parade Hill Road New Canaan, CT 06840 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 \$520 (1 at \$70 per pay period, 6 at \$75 per pay period)
	Occupation CEO Aggregate Year-to-Date \$ 940		
G. Full Name, Mailing Address and ZIP Code Richard Kinch 48 Spruce Run Ramsey, NJ 07446 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 \$119 (\$17 per pay period)
	Occupation Exec Aggregate Year-to-Date \$ 221.00		

SUBTOTAL of Receipts This Page (optional)

\$1,521.00

9709
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 2 OF 3
FOR LINE NUMBER 11(a)(1)

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

<p>A. 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 > \$ 260.00</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$140 (\$20 per pay period)</p>
<p>B. Full Name, Mailing Address and ZIP Code Myron Lubin 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 > \$ 520.00</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$280 (\$40 per pay period)</p>
<p>C. 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 > \$ 290.00</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$170 (1 at \$20 per pay period, 6 at \$25 per pay period)</p>
<p>D. Full Name, Mailing Address and ZIP Code Stephanie Molnar 6304 Raritan 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 > \$ 221.00</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$119 (\$17 per pay period)</p>
<p>E. Full Name, Mailing Address and ZIP Code Larry Morris 15 Lucy Way 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 Chief Fin. Officer</p> <p>Aggregate Year-to-Date > \$ 280.00</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$245 (\$35 per pay period)</p>
<p>F. 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 > \$ 260.00</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$140 (\$20 per pay period)</p>
<p>G. Full Name, Mailing Address and ZIP Code Frank Talz 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 > \$ 375.00</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$210 (\$30 per pay period)</p>

SUBTOTAL of Receipts This Page (optional) \$1,304.00

9709
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 3
FOR LINE NUMBER 11(a)(i)

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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 Sebastian Tarallo 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 > \$ 260.00</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$140 (\$20 per pay period)</p>
<p>B. Full Name, Mailing Address and ZIP Code J. Thomas Van Berkem 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 > \$ 260.00</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$140 (\$20 per pay period)</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional) \$ 280.00

9709 **TOTAL** This Period (last page this line number only) \$3,105.00

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

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 Fleet Bank One Constitution Plaza Hartford, CT 06115-1600	Name of Employer savings account interest income	Date (month, day, year) 4/30/96 5/31/96 6/30/96	Amount of Each Receipt this Period \$89.57 \$84.30 \$61.26
	Occupation Aggregate Year-to-Date > \$ 582.82	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Aggregate Year-to-Date > \$	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Aggregate Year-to-Date > \$	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Aggregate Year-to-Date > \$	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Aggregate Year-to-Date > \$	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Aggregate Year-to-Date > \$	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Aggregate Year-to-Date > \$	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

SUBTOTAL of Receipts This Page (optional) **\$235.13**

9710
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 1 OF 2
FOR LINE NUMBER 23

CONTRIBUTIONS TO FEDERAL CANDIDATES AND OTHER PACs

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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
Gephardt in Congress Committee 635 Pennsylvania Ave SE Washington, D.C. 20003	Contrib. to Richard Gephardt, House Cand., MO Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/3/96	\$1,000.00
McHugh for Congress PO Box 7452 Washington, DC 20024	Contrib. to John McHugh, House Cand., NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/14/96	\$5,000.00
DNC/Federal Account 430 South Capital St SE Washington, DC 20003	Contrib. to DNC Federal Account Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/22/96	\$3,000.00
Democratic Sen. Campaign Committee 430 South Capital Street SE Washington, DC 20003	Contrib. to DSCC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/96	\$2,500.00
The Republican House-Senate Dinner PO Box 1721 Washington, D.C. 20013-1721	Contrib. to Republican House-Senate Dinner Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/10/96	\$5,000.00
Sam Gajdenson Re-Election Committee PO Box 75214 Washington, DC 20013-5214	Contrib. to Sam Gajdenson, House Cand., CT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/11/96	\$500.00
Dick Zimmer for Senate Washington, DC	Contrib. to Dick Zimmer, Senate Cand., NJ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/11/96	\$3,000.00
Stevens for Senate PO Box 1766 Washington, DC 20013	Contrib. to Ted Stevens Senate Cand., AK Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/19/96	\$1,000.00
Friends of Rosa DeLauro 501 Capitol Ct NE, Suite 200 Washington, DC 20002	Contrib. to Rosa DeLauro, House Cand., CT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/19/96	\$500.00

SUBTOTAL of Disbursements This Page (optional)

\$21,500

9708
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

CONTRIBUTIONS TO FEDERAL CANDIDATES AND OTHER PACs

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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
Citizens for John Oliver for Congress PO Box 819 Amherst, MA 01004	Contrib. to John Oliver, House Cand., MA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/25/96	\$500.00
B. Full Name, Mailing Address and ZIP Code Barbara Kennelly for Congress PO Box 3719 Central Station Hartford, CT 06103	Contrib. to Barbara Kennelly, House Cand., CT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/30/96	\$1,000.00
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)

\$1,500

9708
TOTAL This Period (last page this line number only)

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