

THE CURTIN LAW OFFICE, P.A.

SIXTH FLOOR
8500 NORMANDALE LAKE BOULEVARD
MINNEAPOLIS, MN 55437

TEL: 612-338-1100

TELEPHONE (612) 822-5500
TELECFAX (612) 831-0088

January 24, 1995

CERTIFIED MAIL/
RETURN RECEIPT REQUESTED

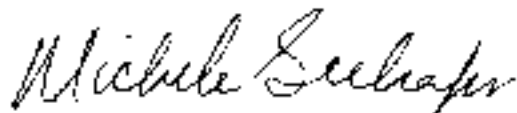
Public Records Office
Federal Election Commission
999 E Street NW
Washington, D.C. 20463

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 January 31 Year-End Report of Receipts and Disbursements on FEC Form 3X.

Very truly,



MICHELE D. SEEHAFFER

Enclosure

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REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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 CD 196659
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 1M)		

4. TYPE OF REPORT

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

Monthly Report Due On:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <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	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>11/29/94</u> through <u>12/31/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 77,187.78
(b) Cash on Hand at Beginning of Reporting Period	\$ 69,859.30	
(c) Total Receipts (from Line 19)	\$ 3,984.25	\$ 37,032.87
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 73,843.55	\$ 114,220.65
7. Total Disbursements (from Line 30)	\$ 21.82	\$ 40,398.92
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 73,821.73	\$ 73,821.73
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 988 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.		

Type or Print Name of Treasurer
Vincent Giuliano

Signature of Treasurer

Vincent Giuliano

Date

1/25/95

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

FEC FORM 3X

(revised 9/83)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE ADVO, Inc. Political Action Committee d/k/a ADVOPAC	REPORT COVERING PERIOD		
	FROM 11-29-94	TO 12-31-94	
	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees	3,621.50	15,713.75	11(a)(i)
i. Itemized (use Schedule A)	94.42	19,726.85	11(a)(ii)
ii. Unitemized			11(a)(iii)
iii. Total (add i and ii) >	3,715.92	35,440.60	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) >	3,715.92	35,440.60	12
12. Transfers From Affiliated/Other Party Committees			13
13. All Loans Received			14
14. Loan Repayments Received			15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17. Other Federal Receipts (Dividends, Interest, etc.)	268.33	1,592.27	18
18. Transfers from Nonfederal Account for Joint Activity			19
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	3,984.25	37,032.87	20
20. Total Federal Receipts (subtract line 18 from line 19) >	3,984.25	37,032.87	
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i. Federal Share			21(a)(ii)
ii. Non-Federal Share	21.82	651.71	21(b)
b. Other Federal Operating Expenditures			21(c)
c. Total Operating Expenditures (add a i, a ii, and b) >	21.82	651.71	22
22. Transfers to Affiliated/Other Party Committees		39,247.21	23
23. Contributions to Federal Candidates/Committees and Other Political Committees			24
24. Independent Expenditures (use Schedule E)			25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26. Loan Repayments Made			27
27. Loans Made			
28. Refunds of Contributions To:			28(a)
a. Individuals/Persons Other Than Political Committees			28(b)
b. Political Party Committees			28(c)
c. Other Political Committees (such as PACs)			28(d)
d. Total Contribution Refunds (add a, b and c) >		500.00	29
29. Other Disbursements			30
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	21.82	40,398.92	31
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	21.82	40,398.92	
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	3,715.92	37,032.87	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	3,715.92	37,032.87	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	21.82	651.71	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	21.82	651.71	37

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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 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

95039015451

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) 11/30/94 12/30/94	Amount of Each Receipt this Period \$123.78 \$144.55
	Occupation Aggregate Year-to-Date > \$ 1592.27		
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) \$268.33
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 07
OF
FOR LINE NUMBER
11(a)(1)

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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 \$36 (\$12 per pay period)
	Occupation Asst Corp Controller Aggregate Year-to-Date \$ 312		
B. Full Name, Mailing Address and ZIP Code Jean Ahern 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 \$30 (\$10 per pay period)
	Occupation RVP Aggregate Year-to-Date \$ 230		
C. Full Name, Mailing Address and ZIP Code David Abrams 32 Cedarwood Road 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 \$24 (\$8 per pay period)
	Occupation Software Spec. Aggregate Year-to-Date \$ 218		
D. 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 \$42 (\$14.00 per pay period)
	Occupation Manager Aggregate Year-to-Date \$ 222		
E. Full Name, Mailing Address and ZIP Code David Rokelman 266 Farmington Drive Lakeside Park 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 \$51 (\$17 per pay period)
	Occupation RVP Aggregate Year-to-Date \$ 442		
F. Full Name, Mailing Address and ZIP Code David Bradley 81 Main Street Southport, CT 06490 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 \$45 (\$15 per pay period)
	Occupation VP Aggregate Year-to-Date \$ 270		
G. Full Name, Mailing Address and ZIP Code Paul Case 41531 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 \$46.50 (\$15.50 per pay period)
	Occupation Exec. Aggregate Year-to-Date \$ 412		

SUBTOTAL of Receipts This Page (optional) \$274.50

TOTAL This Period (last page this line number only)

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SCHEDULE A

**ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS**

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

PAGE 2 OF 9
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 Dan Chitwood 13767 Offutt Drive Carmel, IN 46032</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 > \$ 260</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$30 (\$10 per pay period)</p>
<p>B. Full Name, Mailing Address and ZIP Code Kay Clarke 89 River Road East Haddam, CT 06423</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 > \$ 94.50</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$64.50 (\$21.50 per pay period)</p>
<p>C. Full Name, Mailing Address and ZIP Code Lawrence Cook 7925 Northeast 129th St Kirkland, WA 98034</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 > \$ 200</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$30 (\$10 per pay period)</p>
<p>D. Full Name, Mailing Address and ZIP Code Peter Corrau 3 Kimberly Drive Manchester, CT 06040</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 Prds., NAM</p> <p>Aggregate Year-to-Date > \$ 75</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$75 (\$25 per pay period)</p>
<p>E. Full Name, Mailing Address and ZIP Code J.C. Dennis 23 Sarah Drive Avon, CT</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 > \$ 325</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$37.50 (\$12.50 per pay period)</p>
<p>F. Full Name, Mailing Address and ZIP Code Gregg Dittoc 13802 Khilani Court Tampa, FL 33624</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 > \$ 90</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$45 (\$15 per pay period)</p>
<p>G. Full Name, Mailing Address and ZIP Code Larry Dunn 1833 Asylum Avenue West Hartford, CT 06117</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 Vice President</p> <p>Aggregate Year-to-Date > \$ 77</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$43.50 (\$14.50 per pay period)</p>

SUBTOTAL of Receipts This Page (optional) \$325.50

TOTAL This Period (last page this line number only)

SCHEDULE A

**ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS**

Use separate schedule(s)
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Detailed Summary Page

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

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

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A. Full Name, Mailing Address and ZIP Code Joseph Durrett 97 Mallard Drive Avon, CT 06001		Name of Employer Advn, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$150 (\$50 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President & CEO	Aggregate Year-to-Date > \$ 1500	
B. Full Name, Mailing Address and ZIP Code Dave Edmondson 880 Timberwood Circle Fairview, TX 75069		Name of Employer Advn, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$30 (\$10 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Sr. Manager	Aggregate Year-to-Date > \$ 260	
C. Full Name, Mailing Address and ZIP Code Tom Feretichak 92 Quail Run Road Suffield, CT 06078		Name of Employer Advn, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$30 (\$10 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation VP	Aggregate Year-to-Date > \$ 266	
D. Full Name, Mailing Address and ZIP Code Linda Fitzgerald 125 South Street #336 Vernon, CT 06066		Name of Employer Advn, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$30 (\$10 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Director	Aggregate Year-to-Date > \$ 260	
E. Full Name, Mailing Address and ZIP Code Brian Gallagher 41 Fawnbrook Lane Simsbury, CT 06070		Name of Employer Advn, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$31 (\$10 for 2 pay periods, \$11 for 1 pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Manager	Aggregate Year-to-Date > \$ 261	
F. Full Name, Mailing Address and ZIP Code Michael Gillen 10492 Allate Court Gibsonia, PA 15044		Name of Employer Advn, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$45 (\$15 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation RVP	Aggregate Year-to-Date > \$ 360	
G. Full Name, Mailing Address and ZIP Code Vincent Giuliano 26 Hollowbrook Road Windsor, CT 06095		Name of Employer Advn, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$60 (\$20 per period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation VP	Aggregate Year-to-Date > \$ 360	

SUBTOTAL of Receipts This Page (optional) \$376.00

TOTAL This Period (last page this line number only)

SCHEDULE A

**ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS**

Use separate schedule(s)
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PAGE 9 OF 9
FOR LINE NUMBER 11(a)(1)

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

A. Full Name, Mailing Address and ZIP Code Raymond Hansen Apt. 6134 Bigelow Commons Enfield, 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 \$62.25 (\$20.75 per pay period)
	Occupation Sr. VP Aggregate Year-to-Date > \$ 5539.50		
B. 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 \$31.50 (\$10.50 per pay period)
	Occupation Director Aggregate Year-to-Date > \$ 5273		
C. Full Name, Mailing Address and ZIP Code John Healy 91 Green Hill Road Longmeadow, 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 \$36 (\$10.00 for 2 pay periods, \$16 for 1 pay period)
	Occupation Director Aggregate Year-to-Date > \$ 5284		
D. Full Name, Mailing Address and ZIP Code David Hennessey 6 Whitewater Turn Simsbury, CT 06081 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 \$30 (\$10.00 per pay period)
	Occupation Asst. Gen. Counsel Aggregate Year-to-Date > \$ 5260		
E. Full Name, Mailing Address and ZIP Code Robert Henry 10380 Plum Tree #206 Hales Corners, WI 53130 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 \$24 (\$8.00 per pay period)
	Occupation Manager Aggregate Year-to-Date > \$ 5208		
F. 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 \$46.50 (\$15.50 per pay period)
	Occupation Vice President Aggregate Year-to-Date > \$ 403		
G. 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 \$216 (\$70 for 1 pay period, \$73 for 2 pay periods)
	Occupation CEO Aggregate Year-to-Date > \$ 51826		

BUBTOTAL of Receipts This Page (optional)

\$446.25

TOTAL This Period (last page this line number only)

SCHEDULE A

**ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS**

Use separate schedule(s)
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Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 1(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 Vernon 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 > \$ 260</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$30 (\$10 per pay period)</p>
<p>B. Full Name, Mailing Address and ZIP Code George Kuttard 5346 E. Charleston Avenue 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 Div. Controller</p> <p>Aggregate Year-to-Date > \$ 390</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$45 (\$15 per pay period)</p>
<p>C. Full Name, Mailing Address and ZIP Code Ginger Kielarowski Heron Hill Drive Downington, PA 19335</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 Director</p> <p>Aggregate Year-to-Date > \$ 260</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$30 (\$10 per pay period)</p>
<p>D. 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 > \$ 442</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$51 (\$17 per pay period)</p>
<p>E. Full Name, Mailing Address and ZIP Code William Kurowitz 45 Tollgate Road S. Glastonbury, CT 06073</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 > \$ 416</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$48 (\$16 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 Sr. V.P.</p> <p>Aggregate Year-to-Date > \$ 260</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$30 (\$10 per pay period)</p>
<p>G. Full Name, Mailing Address and ZIP Code David Landis 7000 E. Vermont Avenue Paradise Valley, AZ 85223</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 > \$ 416</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$48 (\$16 per pay period)</p>

SUBTOTAL of Receipts This Page (optional)

\$282

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 97
OF
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 James Leahy 5 Holly O'Neill Road Wallingford, CT 06492</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 Director</p> <p>Aggregate Year-to-Date > \$ 304</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$30 (\$10 per pay period)</p>
<p>B. Full Name, Mailing Address and ZIP Code Paul Leone 1629 W. Chloesmague Hoffman Estates, IL 60195</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 Director</p> <p>Aggregate Year-to-Date > \$ 260</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$30 (\$10 per pay period)</p>
<p>C. Full Name, Mailing Address and ZIP Code Connie Libchan 839 North Point San Francisco, CA 94109</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 > \$ 260</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$30 (\$10 per pay period)</p>
<p>D. 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 > \$ 364</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$42 (\$14 per pay period)</p>
<p>E. 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 > \$ 1040</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$120 (\$40 per pay period)</p>
<p>F. Full Name, Mailing Address and ZIP Code Brian Mulhoney P.O. 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 > \$ 260</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$30 (\$10 per pay period)</p>
<p>G. Full Name, Mailing Address and ZIP Code Gary Majewicz 17 Upton Street Chicopee, MA 01015</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 Auditor</p> <p>Aggregate Year-to-Date > \$ 201.50</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$23.25 (\$7.75 per pay period)</p>

SUBTOTAL of Receipts This Page (optional) \$305.25

TOTAL This Period (last page this line number only)

95039615457

SCHEDULE A

**ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS**

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

PAGE 9
OF
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)
ADVOC, Inc. Political Action Committee, aka ADVOPAC

<p>A. 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 > \$ 270</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$45 (\$15 per pay period)</p>
<p>B. 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 > \$ 530</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$70 (\$20 for 1 pay period, \$25 for 2 pay periods)</p>
<p>C. 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 > \$ 442</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$51 (\$17 per pay period)</p>
<p>D. 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 Financial Officer</p> <p>Aggregate Year-to-Date > \$ 910</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$105 (\$35 per pay period)</p>
<p>E. Full Name, Mailing Address and ZIP Code Glen Puck 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</p> <p>Aggregate Year-to-Date > \$ 360</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$30 (\$10 per pay period)</p>
<p>F. Full Name, Mailing Address and ZIP Code Edwin Pearl 2426 Leslie Detroit, MI 48238</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 > \$ 280</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$45 (\$15 per pay period)</p>
<p>G. Full Name, Mailing Address and ZIP Code Don Raffaelli 7405 W. 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 > \$ 260</p>	<p>Date (month, day, year) Twice monthly payroll deduction</p>	<p>Amount of Each Receipt this Period \$30 (\$10 per pay period)</p>

SUBTOTAL of Receipts This Page (optional)

\$376

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)(1)

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

A. Full Name, Mailing Address and ZIP Code Jeff Romans 1170 Lafayette Drive Edlersburg, MD 21784	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$30 (\$10 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RVP	Aggregate Year-to-Date > 5 \$260	
B. Full Name, Mailing Address and ZIP Code Debra Rypkenta 4037 East Bloomfield Road Phoenix, AZ 85032	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$30 (\$10 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Financial Exec.	Aggregate Year-to-Date > 5 \$260	
C. Full Name, Mailing Address and ZIP Code Dan Shert 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 \$60 (\$20 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > 5 \$520	
D. Full Name, Mailing Address and ZIP Code Jonathan Singer 864 Sweetwater Circle Langwood, FL 34526	Name of Employer Advo, Inc.	Date (month, day, year)	Amount of Each Receipt this Period \$250 (one check)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RVP	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code Dan Steever 3349 Washington Ct. Alameda, CA 94501	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$24 (\$8 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RVP	Aggregate Year-to-Date > 6 \$286	
F. Full Name, Mailing Address and ZIP Code Bruce Stewart 6 Grote Road Chester, CT 06512	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$30 (\$10 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Software Specialist	Aggregate Year-to-Date > 6 \$260	
G. Full Name, Mailing Address and ZIP Code David Stigler 75 Ethan Drive Windsor, CT 06095	Name of Employer Advo, Inc.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$30 (\$10 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 > 6 \$260	

SUBTOTAL of Receipts This Page (optional) \$454

TOTAL This Period (last page this line number only)

95039013459

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)(1)

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

A. Full Name, Mailing Address and ZIP Code Frank Talz 25085 Rolling Green Barrington, IL 60010 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 \$75 (\$25 per pay period)
	Occupation General Manager Aggregate Year-to-Date > \$ <u>\$650</u>		
B. 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.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$42 (\$14 per pay period)
	Occupation VP Aggregate Year-to-Date > \$ <u>\$336</u>		
C. Full Name, Mailing Address and ZIP Code Robert Thiess 30911 1st Ave. South Federal Way, WA 98003 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 \$30 (\$10 per pay period)
	Occupation RVP Aggregate Year-to-Date > \$ <u>\$260</u>		
D. Full Name, Mailing Address and ZIP Code Jose Vina 6128 Pino Real Drive El Paso, TX 79912 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 \$30 (\$10 per pay period)
	Occupation Gen. Manager Aggregate Year-to-Date > \$ <u>\$270</u>		
E. Full Name, Mailing Address and ZIP Code J. Thomas Van Berkem 42 Longview Road 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 \$60 (\$20 per pay period)
	Occupation Manager Aggregate Year-to-Date > \$ <u>\$340</u>		
F. 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.	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period \$45 (\$15 per pay period)
	Occupation Exec. Aggregate Year-to-Date > \$ <u>\$390</u>		
G. Full Name, Mailing Address and ZIP Code Robert Hirst 45 Knollwood Lane 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)	Amount of Each Receipt this Period \$500.00 (one check)
	Occupation VP & Controller Aggregate Year-to-Date > <u>1</u>		

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SUBTOTAL of Receipts This Page (optional)	5782
TOTAL This Period (last page this line number only)	\$3621.50

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 1
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

ADVO, Inc. Political Action Committee

25039015451

A. 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
NONE			
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)

0.00

**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

POSTMARKED

Registered/Certified Mail

POSTMARKED

1-26-95

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

JHD

PREPARER

1-31-95

DATE PREPARED

95039615462