



**The Options
Clearing Corporation**

440 South LaSalle Street
Chicago, Illinois 60621-1020
312.322.5700

Frank J. Larocca, Jr. CPA
Vice President/Controller

RECEIVED
JUL 10 12 15 PM '95

July 6, 1995

**VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

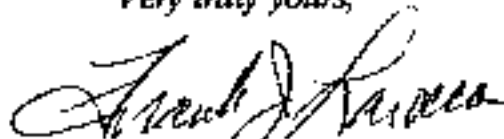
*Federal Election Commission
999 E. Street, N.W.
Washington, D.C. 20463*

To Whom It May Concern:

On behalf of The Options Clearing Corporation Political Action Committee ("OCC PAC"), I am enclosing FEC Form 3X, a report of receipts and disbursements of OCC PAC (the "Report"). The Report is for the period January 1, 1995 through and including June 30, 1995.

If you have any questions with respect to this Report or OCC PAC, please call me at (312) 322-2027.

Very truly yours,


Frank J. Larocca

Enclosure

*FJL/ts
fec3x.wp*

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REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FILED
JUL 10 12 14 PM '95

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) THE OPTIONS CLEARING CORPORATION POLITICAL ACTION COMMITTEE	2. FEC IDENTIFICATION NUMBER C00255877
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 440 SOUTH LASALLE STREET, SUITE 2400	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE CHICAGO, IL 60605-1050	

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

9 5 0 3 9 3 1 3 7 9 7

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>JANUARY 1, 1995</u> through <u>JUNE 30, 1995</u>		
6. (a) Cash on Hand January 1, 19 <u>95</u>		\$ 2688.22
(b) Cash on Hand at Beginning of Reporting Period	\$ 2688.22	
(c) Total Receipts (from Line 19)	\$ -0-	\$ -0-
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 2688.22	\$ 2688.22
7. Total Disbursements (from Line 30)	\$ -0-	\$ -0-
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 2688.22	\$ 2688.22
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	For further information contact: Federal Election Commission 899 E Street, NW Washington, DC 20460 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
FRANK J. LAROCCA, ASSISTANT TREASURER

Signature of Treasurer Date
7/6/95

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

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

(revised 1/1/91)

NAME OF COMMITTEE THE OPTIONS CLEARING CORPORATION POLITICAL ACTION COMMITTEE		REPORT COVERING PERIOD FROM JANUARY 1, 1995 TO JUNE 30, 1995	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11.	Contributions (other than loans) From:		
a.	Individuals/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)	-0-	-0-
ii.	Unitemized	-0-	-0-
iii.	Total	-0-	-0-
b.	Political Party Committees	-0-	-0-
c.	Other Political Committees (such as PACs)	-0-	-0-
d.	Total Contributions	-0-	-0-
12.	Transfers From Affiliated/Other Party Committees	-0-	-0-
13.	All Loans Received	-0-	-0-
14.	Loan Repayments Received	-0-	-0-
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-	-0-
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	-0-	-0-
17.	Other Federal Receipts (Dividends, Interest, etc.)	-0-	-0-
18.	Transfers from Nonfederal Account for Joint Activity	-0-	-0-
19.	Total Receipts	-0-	-0-
20.	Total Federal Receipts	-0-	-0-
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share	-0-	-0-
ii.	Non-Federal Share	-0-	-0-
b.	Other Federal Operating Expenditures	-0-	-0-
c.	Total Operating Expenditures	-0-	-0-
22.	Transfers to Affiliated/Other Party Committees	-0-	-0-
23.	Contributions to Federal Candidates/Committees and Other Political Committees	-0-	-0-
24.	Independent Expenditures (use Schedule E)	-0-	-0-
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-0-	-0-
26.	Loan Repayments Made	-0-	-0-
27.	Loans Made	-0-	-0-
28.	Refunds of Contributions To:		
a.	Individuals/Persons Other Than Political Committees	-0-	-0-
b.	Political Party Committees	-0-	-0-
c.	Other Political Committees (such as PACs)	-0-	-0-
d.	Total Contribution Refunds	-0-	-0-
29.	Other Disbursements	-0-	-0-
30.	Total Disbursements	-0-	-0-
31.	Total Federal Disbursements	-0-	-0-
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	-0-	-0-
33.	Total Contribution Refunds (from line 28d)	-0-	-0-
34.	Net Contributions (other than loans)(subtract line 33 from 32)	-0-	-0-
35.	Total Federal Operating Expenditures	-0-	-0-
36.	Offsets to Operating Expenditures (from line 15)	-0-	-0-
37.	Net Operating Expenditures	-0-	-0-

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
 THE OPTIONS CLEARING CORPORATION POLITICAL ACTION COMMITTEE

A. 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	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date \$	
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	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date \$	
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	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date \$	
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	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date \$	
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	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date \$	
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	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date \$	
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	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date \$	

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SUBTOTAL of Receipts This Page (optional)

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 1
FOR LINE NUMBER

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)

THE OPTIONS CLEARING CORPORATION POLITICAL ACTION COMMITTEE

95039-13800

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
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)

**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
7/7/95

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

D.A.O.
 PREPARER

7/10/95
 DATE PREPARED

95039013801