

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)
 C00215304 121094 p 224
 CLAUDIA VANDIVER
 ONEOK INC EMPLOYEE POLITICAL A
 CTION COMMITTEE
 100 WEST 5TH STREET
 TULSA OK 74103

JAN 23 9 52 AM '95

2. FEC IDENTIFICATION NUMBER
062387

3. 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:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

Twelfth day report preceding _____
 (Type of Election) _____
 election on _____ in the State of _____

Thirtieth day report following the General Election on _____
 in the State of _____

(b) Is this Report an Amendment? YES NO

9 5 0 2 5 4 3 3 0

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	11/29/94 through 12/31/94		
6. (a) Cash on Hand January 1, 1994	94		\$ 16,524.60
(b) Cash on Hand at Beginning of Reporting Period		\$ 2,742.42	
(c) Total Receipts (from line 10)		\$ 2,018.61	\$ 21,197.63
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 4,761.23	\$ 37,722.23
7. Total Disbursements (from Line 30)		\$ 200.00	\$ 33,161.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 4,561.23	\$ 4,561.23
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		\$	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		\$	

For further information contact:
 Federal Election Commission
 999 E Street, NW
 Washington, DC 20463
 Toll Free 800 424-9530
 Local 202-219-3420

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
 Claudia Vandiver, Treasurer

Signature of Treasurer: *Claudia Vandiver* Date: 01/15/95

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 1/1/81)

NAME OF COMMITTEE OR/OR Ind. Employee Political Action Committee	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. Individuals/Persons Other Than Political Committees:		
i. Itemized (use Schedule A)	466.00	2,486.00
ii. Unitemized	1,535.93	18,245.24
iii. Total (add i and ii)	2,001.93	20,731.24
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a ii, b and c)	2,001.93	20,731.24
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.)	16.88	466.39
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	2,018.81	21,197.63
20. Total Federal Receipts (subtract line 16 from line 19)	2,018.81	21,197.63
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4):		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures	-0-	61.00
c. Total Operating Expenditures (Add a i, a ii, and b)	-0-	61.00
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	-0-	10,000.00
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. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (Add a, b and c)		
29. Other Disbursements	200.00	23,100.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	200.00	33,161.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	200.00	33,161.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	2,001.93	20,731.24
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans) (subtract line 33 from 32)	2,001.93	20,731.24
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	-0-	61.00
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35)	-0-	61.00

1
2
3
4
5
6
7
8
9
0
1
2
3
4
5
6
7
8
9
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)
ONEOK Inc. Employee Political
Action Committee

PBC ID No. 062387

A. Full Name, Mailing Address and ZIP Code Bill A. Carr 5231 South Harvard Tulsa, OK 74135	Name of Employer ONEOK Exploration Company Occupation Manager Acquisitions	Date (month, day, year) 08/23/94	Amount of Each Receipt this Period -0-
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Aggregate Year-To-Date > \$ 250.00		
B. Full Name, Mailing Address and ZIP Code William L. Ford 14 Country Club Road Shawnee, OK 74802	Name of Employer Shawnee Milling Company Occupation President	Date (month, day, year) 01/25/94	Amount of Each Receipt this Period -0-
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Aggregate Year-To-Date > \$ 300.00		
C. Full Name, Mailing Address and ZIP Code J. H. Graves 2219 East 45th Place Tulsa, OK 74105	Name of Employer Calumet Oil Company Occupation President and Owner	Date (month, day, year) 01/20/94	Amount of Each Receipt this Period -0-
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Aggregate Year-To-Date > \$ 300.00		
D. Full Name, Mailing Address and ZIP Code Stephen Jastras 6123 South Florence Place Tulsa, OK 74136	Name of Employer Memorex Telex Occupation Retired chairman	Date (month, day, year) 01/20/94	Amount of Each Receipt this Period -0-
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Aggregate Year-To-Date > \$ 300.00		
E. Full Name, Mailing Address and ZIP Code Bert H. Mackie 3218 Neilson Drive Enid, OK 73701	Name of Employer Security National Bank Occupation President	Date (month, day, year) 02/07/94	Amount of Each Receipt this Period -0-
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Aggregate Year-To-Date > \$ 300.00		
F. Full Name, Mailing Address and ZIP Code J. D. Scott 7845 South 30th West Avenue Tulsa, OK 74132	Name of Employer ONEOK Inc. Occupation Retired Chairman	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period -0-
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Aggregate Year-To-Date > \$ 250.00		
G. Full Name, Mailing Address and ZIP Code Larry W. Brummett 9915 South Braden Tulsa, OK 74136	Name of Employer ONEOK INC. Occupation Chairman	Date (month, day, year) Monthly payroll deduction	Amount of Each Receipt this Period 25.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Aggregate Year-To-Date > \$ 300.00		

SUBTOTAL of Receipts This Page (optional) 25.00

TOTAL This Period (last page this line number only)

9505294332

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	2	3
FOR LINE NUMBER		
11a1		

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)
ONEOK Inc. Employee Political Action Committee

FEC ID No. 062387

3
4
5
6
7
8
9

A. Full Name, Mailing Address and ZIP Code B. E. Cheffin 1104 South Oak Broken Arrow, OK 74012		Name of Employer Oklahoma Natural Gas Company	Date (month, day, year) Twice-monthly payroll deduction	Amount of Each Receipt this Period 37.50 (\$12.50 per pay period)
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A		Occupation VP - Customer Serv.	Aggregate Year-To-Date > \$ 300.00	
B. Full Name, Mailing Address and ZIP Code James W. Garrett 2537 West 68th Street Tulsa, OK 74132		Name of Employer Oklahoma Natural Gas Company	Date (month, day, year) Monthly payroll deduction	Amount of Each Receipt this Period 25.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A		Occupation VP - Operations	Aggregate Year-To-Date > \$ 300.00	
C. Full Name, Mailing Address and ZIP Code F. D. Helms 2714 Buford Muskogee, OK 74403		Name of Employer Oklahoma Natural Gas Company	Date (month, day, year) Twice-monthly payroll deduction	Amount of Each Receipt this Period 37.50 (\$12.50 per pay period)
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A		Occupation District Vice Pres.	Aggregate Year-To-Date > \$ 300.00	
D. Full Name, Mailing Address and ZIP Code Walter H. Radailovich 4922 East 38th Place Tulsa, OK 74135		Name of Employer Oklahoma Natural Gas Company	Date (month, day, year) Monthly payroll deduction	Amount of Each Receipt this Period 25.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A		Occupation VP - Corp. Comm.	Aggregate Year-To-Date > \$ 300.00	
E. Full Name, Mailing Address and ZIP Code Norman E. Duckworth 6517 East 86th Place Tulsa, OK 74133		Name of Employer Oklahoma Natural Gas Company	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period 30.00 (\$10.00 per pay period)
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A		Occupation VP - Human Resources	Aggregate Year-To-Date > \$ 240.00	
F. Full Name, Mailing Address and ZIP Code John B. Manning 2712 Charles Drive El Reno, OK 73036		Name of Employer Oklahoma Natural Gas Company	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period 30.00 (\$10.00 per pay period)
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A		Occupation Area Manager	Aggregate Year-To-Date > \$ 240.00	
G. Full Name, Mailing Address and ZIP Code Charles Probst POB 1372 Woodward, OK 73802		Name of Employer Oklahoma Natural Gas Company	Date (month, day, year) Twice monthly payroll deduction	Amount of Each Receipt this Period 30.00 (\$10.00 per pay period)
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A		Occupation Area Manager	Aggregate Year-To-Date > \$ 240.00	

SUBTOTAL of Receipts This Page (optional)	215.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)
ONEOK Inc. Employee Political Action Committee

FEC ID No. D62387

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Glen Johnson Drawer 148 Okemah, OK 74859	House - Dist. 24 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/94	100.00
B. Full Name, Mailing Address and ZIP Code Itemized Total	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) N/A	12/08/94	100.00
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)	200.00
TOTAL This Period (last page this line number only)	200.00

95037594035

**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

1-25-95

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

JM H
 PREPARER

1-30-95
 DATE PREPARED

9
5
0
3
2
5
9
4
9
8
6