

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. COMMITTEE NAME: 61693 P: 203 PUBLIC POLITICAL ACTION COMMITTEE ON CONSTITUTIONAL POLITICAL ACTI 123 N WACKER DRIVE CHICAGO IL 60606	Jul 15 1 03 PM '93 2. FEC IDENTIFICATION NUMBER 3. <input type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).
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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

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>01/01/93</u> through <u>06/30/93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ 34,443.09
(b) Cash on Hand at Beginning of Reporting Period	\$ 34,443.09	
(c) Total Receipts (from Line 19)	\$ 7,975.04	\$ 7,975.04
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 42,418.13	\$ 42,418.13
7. Total Disbursements (from Line 30)	\$ 2,375.00	\$ 2,375.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 40,043.13	\$ 40,043.13
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 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 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 Paul I. Rabin, Treasurer	Date July 9, 1993
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.

2 3 4 3 6 4 3 0 4 3 0 4

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
Aon CORPORATION POLITICAL ACTION COMMITTEE	FROM 01/01/93	TO: 06/30/93
	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).....	5,037.75	5,037.75
ii. Unitemized.....	2,937.29	2,937.29
iii. Total..... (add i and ii) >	7,975.04	7,975.04
b. Political Party Committees.....	-0-	-0-
c. Other Political Committees (such as PACs).....	-0-	-0-
d. Total Contributions..... (add a iii, b and c) >	7,975.04	7,975.04
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..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	7,975.04	7,975.04
20. Total Federal Receipts..... (subtract line 18 from line 19) >	7,975.04	7,975.04
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..... (add a i, a ii, and b) >	-0-	-0-
22. Transfers to Affiliated/Other Party Committees.....	-0-	-0-
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	250.00	250.00
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. Individual/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..... (add a, b and c) >	-0-	-0-
29. Other Disbursements.....	2,125.00	2,125.00
30. Total Disbursements..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	2,375.00	2,375.00
31. Total Federal Disbursements..... (subtract line 21 a ii from line 30) >	2,375.00	2,375.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d).....	7,975.04	7,975.04
33. Total Contribution Refunds (from line 28d).....	-0-	-0-
34. Net Contributions (other than loans)(subtract line 33 from 32).....	7,975.04	7,975.04
35. Total Federal Operating Expenditures..... (add 21 a i and 21 b) >	-0-	-0-
36. Offsets to Operating Expenditures (from line 15).....	-0-	-0-
37. Net Operating Expenditures..... (subtract line 36 from 35) >	-0-	-0-

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ITEMIZED RECEIPTS

SCHEDULE 'A'

ANY INFORMATION COPIED FROM SUCH REPORTS OR 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 FOR SUCH COMMITTEE.

NAME OF COMMITTEE (IN FULL): ACM CORPORATION POLITICAL ACTION COMMITTEE FIC# C00211250

LINE	FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER OCCUPATION:	DATE (MM, DD, YY) Frequency Payroll Deduct	AMT OF EACH RCPT THIS PERIOD
A.	Jerome I. Baer 1616 Birch Northbrook, IL 60062	Combined Insurance Vice President	Bi-Weekly Payroll Deduct	\$ 253.86 \$ 21.73 Per Pay Check
RECEIPT FOR: PRIMARY GENERAL OTHER N/A		AGGREGATE YEAR-TO-DATE \$ 253.86		
B.	William D. Baldwin 8797 River Road Richmond, VA 23229	Life of Virginia Sr. Vice President	Bi-Weekly Payroll Deduct	\$ 576.00 \$ 48.00 Per Pay Check
RECEIPT FOR: PRIMARY GENERAL OTHER N/A		AGGREGATE YEAR-TO-DATE \$ 576.00		
C.	Paul J. Boudreau 631 Mullady Parkway Libertyville, IL 60048	Combined Insurance Sr. Vice President	Bi-Weekly Payroll Deduct	\$ 317.28 \$ 26.92 Per Pay Check
RECEIPT FOR: PRIMARY GENERAL OTHER N/A		AGGREGATE YEAR-TO-DATE \$ 317.28		
D.	Kyle Campbell 1333 N. Ridge Ave. Arlington Heights, IL 60004	Ryan Insurance Vice President	Bi-Weekly Payroll Deduct	\$ 240.00 \$ 20.00 Per Pay Check
RECEIPT FOR: PRIMARY GENERAL OTHER N/A		AGGREGATE YEAR-TO-DATE \$ 240.00		
SUBTOTAL OF RECEIPTS THIS PAGE:				\$ 1,387.14

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (IN FULL): AON CORPORATION POLITICAL ACTION COMMITTEE FEC# C00211250

A.	FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER	DATE(MM,DD,YY)	AMT OF EACH RCPT THIS PERIOD
	Daniel T. Cox 1000 Vine Street Winnetka, IL 60093	Life of Virginia OCCUPATION: Chairman	Bi-Weekly Payroll Deduct	\$ 576.00 \$ 48.00 Per Pay Check
	RECEIPT FOR: <u>PRIMARY</u> <u>GENERAL</u> <u>OTHER</u> N/A	AGGREGATE YEAR-TO-DATE \$ 576.00		
B.	FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER	DATE(MM,DD,YY)	AMT OF EACH RCPT THIS PERIOD
	Robert H. Poys 881 Wairfield Road Iverness, IL 60067	REH Co. OCCUPATION: President	Bi-Weekly Payroll Deduct	\$ 399.24 \$ 34.04 Per Pay Check
	RECEIPT FOR: <u>PRIMARY</u> <u>GENERAL</u> <u>OTHER</u> N/A	AGGREGATE YEAR-TO-DATE \$ 399.24		
C.	FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER	DATE(MM,DD,YY)	AMT OF EACH RCPT THIS PERIOD
	Alfred B. Fretta 16 Millbrook Drive Princeton Junction, NJ 08550	Aon RE OCCUPATION: Sr. Vice President	Bi-Weekly Payroll Deduct	\$ 240.00 \$ 20.00 Per Pay Check
	RECEIPT FOR: <u>PRIMARY</u> <u>GENERAL</u> <u>OTHER</u> N/A	AGGREGATE YEAR-TO-DATE \$ 240.00		
D.	FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER	DATE(MM,DD,YY)	AMT OF EACH RCPT THIS PERIOD
	Leon F. Gonzalez 7 Windsor Road Morris Plain, NJ 07950	Aon RE OCCUPATION: Sr. Vice President	Bi-Weekly Payroll Deduct	\$ 240.00 \$ 20.00 Per Pay Check
	RECEIPT FOR: <u>PRIMARY</u> <u>GENERAL</u> <u>OTHER</u> N/A	AGGREGATE YEAR-TO-DATE \$ 240.00		
SUBTOTAL OF RECEIPTS THIS PAGE:				\$ 1,455.24

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ITEMIZED RECEIPTS

SCHEDULE 'A'

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NAME OF COMMITTEE (IN FULL): AON CORPORATION POLITICAL ACTION COMMITTEE FEC# C00211250

A. FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER	DATE(MM,DD,YY)	AMT OF EACH RCPT THIS PERIOD
Barry Holden 4 Keilana Drive Wayne, NJ 07470	AON RE OCCUPATION: Sr. Vice President	Bi-Weekly Payroll Deduct	\$ 240.00 \$ 20.00 Per Pay Check
RECEIPT FOR: <input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input type="checkbox"/> OTHER N/A	AGGREGATE YEAR-TO-DATE \$ 240.00		
B. FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER	DATE(MM,DD,YY)	AMT OF EACH RCPT THIS PERIOD
George W. Lawler 1938 Stanton Court Arlington Heights, IL 60004	Combined Insurance OCCUPATION: Vice President	Bi-Weekly Payroll Deduct	\$ 246.90 \$ 20.77 Per Pay Check
RECEIPT FOR: <input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input type="checkbox"/> OTHER N/A	AGGREGATE YEAR-TO-DATE \$ 246.90		
C. FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER	DATE(MM,DD,YY)	AMT OF EACH RCPT THIS PERIOD
Eugo A. Lorenz 950 N. Michigan Avenue Chicago, IL 60611	Combined Insurance OCCUPATION: Vice President	Bi-Weekly Payroll Deduct	\$ 222.72 \$ 18.85 Per Pay Check
RECEIPT FOR: <input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input type="checkbox"/> OTHER N/A	AGGREGATE YEAR-TO-DATE \$ 222.72		
D. FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER	DATE(MM,DD,YY)	AMT OF EACH RCPT THIS PERIOD
Ronald D. Meyer 58 Fresno Ct. Naperville, IL 60540	RHE Co. OCCUPATION: Vice President	Bi-Weekly Payroll Deduct	\$ 280.35 \$ 23.65 Per Pay Check
RECEIPT FOR: <input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input type="checkbox"/> OTHER N/A	AGGREGATE YEAR-TO-DATE \$ 280.35		
SUBTOTAL OF RECEIPTS THIS PAGE:			\$ 989.97

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ITEMIZED RECEIPTS

SCHEDULE 'A'

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NAME OF COMMITTEE (IN FULL): AON CORPORATION POLITICAL ACTION COMMITTEE FEC# C00211250

A.	FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER	DATE (MM, DD, YY)	AMT OF EACH RCPT THIS PERIOD
	Michael D. Rice 2 S. 001 Country Club Lane Wheaton, IL 60187	BBB Co. OCCUPATION: Sr. Vice President	Bi-Weekly Payroll Deduct	\$ 738.48 \$ 63.46 Per Pay Check
	RECEIPT FOR: <u>PRIMARY</u> <u>GENERAL</u> <u>OTHER</u> N/A	AGGREGATE YEAR-TO-DATE \$ 738.48		
B.	FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER	DATE (MM, DD, YY)	AMT OF EACH RCPT THIS PERIOD
	Paul T. Slamar 21844 N. Vesper Court Barrington, IL 60010	BBB Co. OCCUPATION: Vice President	Bi-Weekly Payroll Deduct	\$ 226.92 \$ 19.23 Per Pay Check
	RECEIPT FOR: <u>PRIMARY</u> <u>GENERAL</u> <u>OTHER</u> N/A	AGGREGATE YEAR-TO-DATE \$ 226.92		
C.	FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER	DATE (MM, DD, YY)	AMT OF EACH RCPT THIS PERIOD
	Robert A. Van Derhoef 24 Pitcairn Drive Roseland, NJ 07068	Aon RR OCCUPATION: Sr. Vice President	Bi-Weekly Payroll Deduct	\$ 240.00 \$ 20.00 Per Pay Check
	RECEIPT FOR: <u>PRIMARY</u> <u>GENERAL</u> <u>OTHER</u> N/A	AGGREGATE YEAR-TO-DATE \$ 240.00		
SUBTOTAL OF RECEIPTS THIS PAGE:				\$ 1,205.40
TOTAL RECEIPTS THIS PERIOD:				\$ 5,037.75

93038480389

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)

Aon CORPORATION POLITICAL ACTION COMMITTEE

0
1
2
3
4
5
6
7
8
9
0

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bliley for Congress Committee 3830 Ingalls Avenue Alexandria, VA 22302	General contribution; Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/26/93	\$ 250.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$250 00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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 committees.

NAME OF COMMITTEE (in Full)

Aon CORPORATION POLITICAL ACTION COMMITTEE

1
2
3
4
5
6
7
8
9
0
1
2
3
4
5
6
7
8
9
0

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Virginia Democratic Caucus 1108 Main Street Richmond, VA 23219	General contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/18/93	\$ 125.00
B. Full Name, Mailing Address and ZIP Code Friends of Pete Giesen P.O. Box 1110 Waynesboro, VA 22980	General contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/13/93	\$ 100.00
C. Full Name, Mailing Address and ZIP Code Heilig for Delegate 1102 Llewellyn Avenue Norfolk, VA 23507	General contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/26/93	\$ 100.00
D. Full Name, Mailing Address and ZIP Code Friends of Lewis W. Parker Jr. P.O. Box 120 South Hill, VA 23970	General contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/13/93	\$ 250.00
E. Full Name, Mailing Address and ZIP Code Friends of Harvey Morgan Post Office Box 949 Gloucester, VA 23061	General contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/08/93	\$ 50.00
F. Full Name, Mailing Address and ZIP Code Robert Madigan for State Senator Post Office Box 250 Lincoln, IL 62656	General contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/08/93	\$ 500.00
G. Full Name, Mailing Address and ZIP Code Life Insurance Council of New York PAC 475 Park Avenue South New York, NY 10016	General contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/08/93	\$1,000.00
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)

\$2,125.00

**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.

<input checked="" type="checkbox"/> Hand Delivered	DATE OF RECEIPT 7/15/93
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
	DATE OF RECEIPT
D.A.Q. PREPARER	7/15/93 DATE PREPARED

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