



RECEIVED  
JUN 15 8 22 AM '95

CMAC Investment Corporation

1601 Market Street  
Philadelphia, PA 19101  
(800) 523-1988  
(215) 564-6600  
(215) 496-0346 (Fax)

June 16, 1995

Federal Election Commission  
999 E Street, N.W.  
Washington, DC 20463

**Re: FEC #C00302166**

Dear Sir or Madam:

Enclosed please find the monthly FEC Form 3X filings for the CMAC Investment Corporation Employees Political Action Committee ("CMAC-PAC").

It is our intention, in the future, to submit reports containing schedules prepared in a computerized format. I have enclosed specimens samples of such schedules in order that you can review them. If you approve of them, please indicate as much in writing, and we will begin submitting them with our July 20th report.

If you have any comments or questions, please contact me at the above address or phone (extension 3336).

Sincerely yours,

Anthony D. Shore  
Assistant Treasurer

Enclosures

cc: C. Robert Quint, Treasurer  
Thomas J. Shelly, Jr., Chairman

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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

Jun 19 9 22 AM '95

1. NAME OF COMMITTEE (in full) <b>CMAC Investment Corp. Employees PAC</b>	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>1601 Market Street, 12th Floor</b>	2. FEC IDENTIFICATION NUMBER <b>C00302166</b>
CITY, STATE and ZIP CODE <b>Philadelphia, PA 19103</b>	3. <input 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 checked="" 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>5/1/95</u> through <u>5/31/95</u>		
6. (a) Cash on Hand January 1, 19 <u>95</u>		\$ 0
(b) Cash on Hand at Beginning of Reporting Period	\$ 3,975.00	
(c) Total Receipts (from Line 19)	\$ 11,400.00	\$ 15,375.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 16,375.00	\$ 15,375.00
7. Total Disbursements (from Line 30)	\$ 1,000.00	\$ 1,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 14,375.00	\$ 14,375.00
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 20483 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  
**C. Robert Quint**

Signature of Treasurer *C Robert Quint* Date **6/15/95**

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

**FEC FORM 3X**  
(revised 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE CMAC Investment Corp. Employees PAC		REPORT COVERING PERIOD FROM 5/1/95 TO 5/31/95	
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		9,710.00	13,460.00
ii. Unitemized		1,690.00	1,915.00
iii. Total (add i and ii) >		11,400.00	15,375.00
b. Political Party Committees		0	0
c. Other Political Committees (such as PACs)		0	0
d. Total Contributions (add a ii, b and c) >		11,400.00	15,375.00
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) >		11,400.00	15,375.00
20. Total Federal Receipts (subtract line 18 from line 19) >		11,400.00	15,375.00
<b>II. Disbursements</b>			
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		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. 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		1,000.00	1,000.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		1,000.00	1,000.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		1,000.00	1,000.00
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)		11,400.00	15,375.00
33. Total Contribution Refunds (from line 28d)		0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)		11,400.00	15,375.00
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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 2  
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)

CMAC Investment Corporation Employees PAC

<b>A. Full Name, Mailing Address and ZIP Code</b> D. Brad Booth 111 W. Avenida Cordoba San Clemente, CA 92672		Name of Employer CMAC	Date (month, day, year) 5/1/95 5/2/95	Amount of Each Receipt this Period 200.00 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Vice President	Aggregate Year-to-Date > \$ 600.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> Catherine Smyth 542 Meadowbrook Drive Huntington Valley, PA 19006		Name of Employer CMAC	Date (month, day, year) 5/1/95	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Vice President	Aggregate Year-to-Date > \$ 200.00	
<b>C. Full Name, Mailing Address and ZIP Code</b> Carl B. Smith 2435 Bryn Mawr Avenue Phila., PA 19131		Name of Employer CMAC	Date (month, day, year) 5/2/95	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Vice President	Aggregate Year-to-Date > \$ 300.00	
<b>D. Full Name, Mailing Address and ZIP Code</b> Kim L. Sauter 239 Ottawa Lane Franklin Lake, NJ 07417		Name of Employer CMAC	Date (month, day, year) 5/1/95	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Assist. Vice Pres.	Aggregate Year-to-Date > \$ 200.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> C. Robert Quint 207 Windsor Ave. Melrose Park, PA 19126		Name of Employer CMAC	Date (month, day, year) 5/1/95	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Vice President	Aggregate Year-to-Date > \$ 500.00	
<b>F. Full Name, Mailing Address and ZIP Code</b> Susan Kropp 40 Van Baren St. Freeport, NY 11520		Name of Employer CMAC	Date (month, day, year) 5/5/95	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Vice President	Aggregate Year-to-Date > \$ 500.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> Bonnie Walker 5224 Beckington Lane Dallas, TX 75287-5418		Name of Employer CMAC	Date (month, day, year) 5/3/95	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Senior Account Exec.	Aggregate Year-to-Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional) ..... 2,500.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 4  
FOR LINE NUMBER 11 (A) (i)

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NAME OF COMMITTEE (in Full)

CMAC Investment Corporation Employees PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
G Marshall Carter 8104 Haymarket Lane Raleigh, NC 27615 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	CMAC Occupation: Senior Account Exec. Aggregate Year-to-Date > \$ 300.00	5/4/95	300.00
B. Full Name, Mailing Address and ZIP Code Herbert Wender 16 Wood Glen Way Boonton, NJ 07005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	CMAC Occupation: Chairman Aggregate Year-to-Date > \$ 1,000.00	5/2/95	1,000.00
C. Full Name, Mailing Address and ZIP Code Marsha Gordon 9250 Olde Hickory Circle Ft. Myers, FL 33912 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	CMAC Occupation: Senior Account Exec. Aggregate Year-to-Date > \$ 250.00	5/1/95	250.00
D. Full Name, Mailing Address and ZIP Code Frank P. Filippis 252 Ravenscliff St. Davids, PA 19087 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	CMAC Occupation: President & CEO Aggregate Year-to-Date > \$ 1,000.00	5/8/95	1,000.00
E. Full Name, Mailing Address and ZIP Code Karen L. Gladstone 1742 E. Salt Sage Dr. Phoenix, AZ 85048 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	CMAC Occupation: Area Sales Manager Aggregate Year-to-Date > \$ 200.00	5/2/95	200.00
F. Full Name, Mailing Address and ZIP Code Sharon L. Crowther 9823 Bird Court Fountain Valley, CA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	CMAC Occupation: Vice President Aggregate Year-to-Date > \$ 300.00	5/16/95	300.00
G. Full Name, Mailing Address and ZIP Code Denny P. Watkins 1145 Wiget Lane Walnut Creek, CA 94598 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	CMAC Occupation: Account Executive Aggregate Year-to-Date > \$ 250.00	5/10/95	250.00

SUBTOTAL of Receipts This Page (optional)

3,300.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

CMAC Investment Corporation Employees PAC

<b>A. Full Name, Mailing Address and ZIP Code</b> Cathy S. Garrett 7340 Miracle Dr. Indianapolis, IN 46237		Name of Employer CMAC	Date (month, day, year) 5/16/95	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Account Executive	Aggregate Year-to-Date > \$ 200.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> David M. Acquisti 606 Oakland Royal Oak, MI 48067		Name of Employer CMAC	Date (month, day, year) 5/16/95	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Account Executive	Aggregate Year-to-Date > \$ 200.00	
<b>C. Full Name, Mailing Address and ZIP Code</b> Nicholas C. Costas 38 Copperwine Rd. Topsfield, MA 01983		Name of Employer CMAC	Date (month, day, year) 5/6/95	Amount of Each Receipt this Period 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Vice President	Aggregate Year-to-Date > \$ 600.00	
<b>D. Full Name, Mailing Address and ZIP Code</b> William S. Woodruff 1305 Washington Street South Northfield, MN 55057		Name of Employer CMAC	Date (month, day, year) 5/16/95	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Account Executive	Aggregate Year-to-Date > \$ 200.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> Maria Rosenbach 20 Azalea Road Syosset, NY		Name of Employer CMAC	Date (month, day, year) 5/13/95	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Account Executive	Aggregate Year-to-Date > \$ 200.00	
<b>F. Full Name, Mailing Address and ZIP Code</b> Paul F. Fischer 10 Prickett Lane Mt. Holly, NJ		Name of Employer CMAC	Date (month, day, year) 5/25/95	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Senior Vice President	Aggregate Year-to-Date > \$ 500.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> James A. Zarnowski 4270 Gunnin Rd. Norcross, GA		Name of Employer CMAC	Date (month, day, year) 5/26/95	Amount of Each Receipt this Period 750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Vice President	Aggregate Year-to-Date > \$ 750.00	

SUBTOTAL of Receipts This Page (optional)

2,650.00

TOTAL This Period (last page this line number only)



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 5  
FOR LINE NUMBER 11 (A) (ii)

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**NAME OF COMMITTEE (in Full)**  
CMAC Investment Corporation Employees PAC

<b>A. Full Name, Mailing Address and ZIP Code</b> Scott G. Schulstad 321 Iris Ave. Corona Del Mar, CA 92625		<b>Name of Employer</b> CMAC	<b>Date (month, day, year)</b> 5/9/95	<b>Amount of Each Receipt this Period</b> 100.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Assistant Vice Pres.	<b>Aggregate Year-to-Date</b> > \$ 100.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> Anthony D. Shore 7836 Spring Ave. Elkins Park, PA 19077		<b>Name of Employer</b> CMAC	<b>Date (month, day, year)</b> 5/4/95	<b>Amount of Each Receipt this Period</b> 100.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Asst. General Counsel	<b>Aggregate Year-to-Date</b> > \$ 100.00	
<b>C. Full Name, Mailing Address and ZIP Code</b> David S. Neuschwander 1419 Decstine Rd. Hotfield, PA 19440		<b>Name of Employer</b> CMAC	<b>Date (month, day, year)</b> 5/4/95	<b>Amount of Each Receipt this Period</b> 100.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Corp. Cash Manager	<b>Aggregate Year-to-Date</b> > \$ 100.00	
<b>D. Full Name, Mailing Address and ZIP Code</b> Michele P Ricca 4410 Township Line Rd. Drexel Hill, PA 19026		<b>Name of Employer</b> CMAC	<b>Date (month, day, year)</b> 5/3/95	<b>Amount of Each Receipt this Period</b> 75.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Sr. Accountant	<b>Aggregate Year-to-Date</b> > \$ 75.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> Tami A. Bohm 1602 Lincoln Drive East Ambler, PA 19002		<b>Name of Employer</b> CMAC	<b>Date (month, day, year)</b> 5/3/95	<b>Amount of Each Receipt this Period</b> 50.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Compliance Admin.	<b>Aggregate Year-to-Date</b> > \$ 50.00	
<b>F. Full Name, Mailing Address and ZIP Code</b> Deborah A. Conroy 805 Litwa Lane Aston, PA 19014		<b>Name of Employer</b> CMAC	<b>Date (month, day, year)</b> 5/8/95	<b>Amount of Each Receipt this Period</b> 150.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Asst. Vice President	<b>Aggregate Year-to-Date</b> > \$ 150.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> Sharon Schucolsky 210 Homlock Dr. McMurray, PA 15317		<b>Name of Employer</b> CMAC	<b>Date (month, day, year)</b> 5/18/95	<b>Amount of Each Receipt this Period</b> 100.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Acct. Executive	<b>Aggregate Year-to-Date</b> > \$ 100.00	

**SUBTOTAL** of Receipts This Page (optional) ..... 675.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 5  
FOR LINE NUMBER 11 (A) (11)

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**NAME OF COMMITTEE (In Full)**

CMAC Investment Corp. Employees PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert V. Radicioni 413 Lyceum Ave. Philadelphia, PA	CMAC	5/12/95	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Accountant		Aggregate Year-to-Date > \$ 75.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Julie W. Clark 245 Strawberry Lane Mullien Hill, NJ 08002	CMAC	5/12/95	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Accountant		Aggregate Year-to-Date > \$ 75.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Terry Baskin 1100 Safety Harbor Cove Old Hickory, TN 37138	CMAC	5/15/95	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Account Exec.		Aggregate Year-to-Date > \$ 150.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Karen Crago 10113 N. Ponderosa Dr. Fresno, CA 93720	CMAC	5/16/95	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Account Exec.		Aggregate Year-to-Date > \$ 100.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anna McDowell 7520 Dorcas St. Philadelphia, PA 19111	CMAC	5/23/95	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Asst. Vice President		Aggregate Year-to-Date > \$ 100.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anthony Orman 206 Amanda Lane Phoenixville, PA 19460	CMAC	5/23/95	125.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Asst. Vice President		Aggregate Year-to-Date > \$ 125.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vincent Conca 448 Northcroft Rd. Springfield, PA	CMAC	5/27/95	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Loan Workout Specialist		Aggregate Year-to-Date > \$ 35.00

**SUBTOTAL** of Receipts This Page (optional) ..... 660.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in Full)**

CMAC Investment Corp. Employees PAC

<b>A. Full Name, Mailing Address and ZIP Code</b> Vicki Guffey 2902 E. Sylvia St. Phoenix, AZ 85032	Name of Employer CMAC	Date (month, day, year) 5/25/95	Amount of Each Receipt this Period 125.00
	Occupation Branch Manager Aggregate Year-to-Date > \$ 125.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>B. Full Name, Mailing Address and ZIP Code</b> James P. Brennan 435 Geneva Ave. Phila., PA	Name of Employer Frankford Hospital	Date (month, day, year) 5/26/95	Amount of Each Receipt this Period 50.00
	Occupation Systems Analyst Aggregate Year-to-Date > \$ 50.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>C. Full Name, Mailing Address and ZIP Code</b> Howard Handville 841 NW 49th Way Margate, FL 33063	Name of Employer CMAC	Date (month, day, year) 6/11/95 5/25/95	Amount of Each Receipt this Period 7.00 7.00
	Occupation Sr. Loan/Workout Spec. Aggregate Year-to-Date > \$ 14.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>D. Full Name, Mailing Address and ZIP Code</b> Christian E. Oakley 8392 Dorchester Dr. Huntington Beach, CA 92646	Name of Employer CMAC	Date (month, day, year) 5/11/95 5/25/95	Amount of Each Receipt this Period 10.00 10.00
	Occupation Sr. Account Exec. Aggregate Year-to-Date > \$ 20.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>E. Full Name, Mailing Address and ZIP Code</b> Mallory J. Lee 1412 E. Baringer St. Phila., PA 19150	Name of Employer CMAC	Date (month, day, year) 5/11/95 5/25/95	Amount of Each Receipt this Period 10.00 10.00
	Occupation Branch Manager Aggregate Year-to-Date > \$ 20.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>F. Full Name, Mailing Address and ZIP Code</b> John D. Chludzinski 13507 Galena Place Tampa, FL 33626	Name of Employer CMAC	Date (month, day, year) 5/11/95 5/25/95	Amount of Each Receipt this Period 5.00 5.00
	Occupation Branch Manager Aggregate Year-to-Date > \$ 10.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>G. Full Name, Mailing Address and ZIP Code</b> William J. Marlin 812 Sand Wedge Court Warrington, PA 18976	Name of Employer CMAC	Date (month, day, year) 5/11/95 5/25/95	Amount of Each Receipt this Period 10.00 10.00
	Occupation Director, Human Resources Aggregate Year-to-Date > \$ 20.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	259.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 0 OF 5  
FOR LINE NUMBER 11 (A) (ii)

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**NAME OF COMMITTEE (In Full)**

CMAC Investment Corp. Employees PAC

1  
2  
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12

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jon M. Ballard 4023 NW 69th Terrace Coral Springs, FL 33065	CMAC	5/25/95	10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Asst. Vice Pres.	Aggregate Year-to-Date > \$10.00	
Karen E. Ellsworth 1 Redwood Court Rockland, MA 02370	CMAC	5/25/95	8.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Acct. Executive	Aggregate Year-to-Date > \$8.00	
John F. Fischer 28 Sky View Lane New Canaan, CT 06840	CMAC	5/25/95	10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Account Exec.	Aggregate Year-to-Date > \$10.00	
Katherine M. Kelly 3537 Bay Dr. Baltimore, MD 21220	CMAC	5/25/95	8.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Branch Manager	Aggregate Year-to-Date > \$8.00	
Crain T. Houston, Jr. 1901 Ridge Road Reisterstown, MD 21136	CMAC	5/25/95	8.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Acct. Executive	Aggregate Year-to-Date > \$8.00	
Edward T. Bean 2321 Charlotte Dr. Charlotte, NC 28203	CMAC	5/25/95	10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Acct. Executive	Aggregate Year-to-Date > \$10.00	
Julia P. West 5916 North 3rd St. Phila., PA 19120	CMAC	5/25/95	10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Asst. Manager	Aggregate Year-to-Date > \$10.00	

**SUBTOTAL** of Receipts This Page (optional)

60.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 5 OF 5  
FOR LINE NUMBER 11(A) (ii)

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**NAME OF COMMITTEE (in Full)**

CMAC Investment Corp. Employees PAC

<b>A. Full Name, Mailing Address and ZIP Code</b> Rosemarie Marcum 1596 Lorraine Ave. Columbus, OH 43235		Name of Employer CMAC	Date (month, day, year) 5/25/95	Amount of Each Receipt this Period 5.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Branch Manager	Aggregate Year-to-Date > \$ 5.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> Sandra J. Todd 10121 Waterbrook Lane Charlotte, NC 28277		Name of Employer CMAC	Date (month, day, year) 5/25/95	Amount of Each Receipt this Period 5.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Branch Manager	Aggregate Year-to-Date > \$ 5.00	
<b>C. Full Name, Mailing Address and ZIP Code</b> Kathleen M. Lutes 8644 Summerfield Lane Huntersville, NC 28078		Name of Employer CMAC	Date (month, day, year) 5/25/95	Amount of Each Receipt this Period 2.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Underwriter	Aggregate Year-to-Date > \$ 2.00	
<b>D. Full Name, Mailing Address and ZIP Code</b> Lisa B. Earnhardt 140 Todd Dr. NW Concord, NC 28026		Name of Employer CMAC	Date (month, day, year) 5/25/95	Amount of Each Receipt this Period 1.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Underwriter	Aggregate Year-to-Date > \$ 1.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> Sharon E. Mitchell 8229 Northwest MSM Oklahoma City, OK 73162		Name of Employer CMAC	Date (month, day, year) 5/25/95	Amount of Each Receipt this Period 5.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Branch Manager	Aggregate Year-to-Date > \$ 5.00	
<b>F. Full Name, Mailing Address and ZIP Code</b> Holly Hale 4103 Franklin Park Sterling Heights, MI 48310		Name of Employer CMAC	Date (month, day, year) 5/25/95	Amount of Each Receipt this Period 8.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Branch Manager	Aggregate Year-to-Date > \$ 8.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> Christine C. Tartaglia 28 Fox Hollow Desmond Run Sicklerville, NJ 08081		Name of Employer CMAC	Date (month, day, year) 5/25/95	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Contract Manager	Aggregate Year-to-Date > \$ 10.00	

**SUBTOTAL** of Receipts This Page (optional) ..... 36.00

**TOTAL** This Period (last page this line number only) ..... 1690.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**NAME OF COMMITTEE (In Full)**

CMAC Investment Corp. Employees PAC

20090926

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Fumo for Senate Committee 1208 Tasker Street Philadelphia, PA 19146	Contribution Vince Fumo for State Senate (PA) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/5/95	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional) ..... 1,000.00

TOTAL This Period (last page this line number only) ..... 1,000.00

NAME OF COMMITTEE (in full)  
 COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm.dd.yy)	Amount of Each Receipt this Period
CARL B. SMITH 2435 BRYN MAWR AVENUE PHILADELPHIA, PA 19131  COMMONWEALTH MORTGAGE ASSURANCE COMPANY VICE PRESIDENT, RISK MANAGEMENT	05/02/95	300.00

Aggregate Year-to-Date > \$ 300.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm.dd.yy)	Amount of Each Receipt this Period
C. ROBERT QUINT 207 WINDSOR AVENUE MELROSE PARK, PA 19027  COMMONWEALTH MORTGAGE ASSURANCE COMPANY VICE PRESIDENT/FINANCE AND CONTROLLER	05/02/95	500.00

SPECIMEN

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm.dd.yy)	Amount of Each Receipt this Period
KIP L. SAJTER 239 OTTAWA LANE FRANKLIN LAKES, NJ 07417  COMMONWEALTH MORTGAGE ASSURANCE COMPANY ASST. VICE PRESIDENT/QUALITY ASSURANCE	05/02/95	200.00

Aggregate Year-to-Date > \$ 200.00

NAME OF COMMITTEE (in full)  
 COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
CATHERINE SMYTH 509 MONTGOMERY AVENUE JENKINTOWN, PA 19046		
COMMONWEALTH MORTGAGE ASSURANCE COMPANY VICE PRESIDENT/EASTERN REG. U/W MANAGER	05/02/95	200.00

Aggregate Year-to-Date > \$ 200.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
DOUGLAS J. MADLCO 12 RIDGEWOOD ROAD BRYN MAWR, PA 19010-1714		
COMMONWEALTH MORTGAGE ASSURANCE COMPANY SR. VICE PRESIDENT, NATIONAL SALES MANAGER	05/02/95	1,000.00

SPECIMEN

Aggregate Year-to-Date > \$ 1,000.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
THOMAS J. SHELLY, JR. 3165 S. SMEDLEY STREET PHILADELPHIA, PA 19145		
COMMONWEALTH MORTGAGE ASSURANCE COMPANY VICE PRESIDENT, SECRETARY & GENERAL COUNSEL	05/02/95	500.00
	05/25/95	50.00

Aggregate Year-to-Date > \$ 550.00

NAME OF COMMITTEE (in full)  
 COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
WILLIAM M. DONAHUE 479 NEW ROAD CHURCHVILLE, PA 18966		
COMMONWEALTH MORTGAGE ASSURANCE COMPANY EASTERN REGIONAL SALES MANAGER	05/02/95	750.00
	05/11/95	30.00
	05/25/95	30.00

Aggregate Year-to-Date > \$ 810.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
CAMILLO T. MELCHIORRE 7 APPLETREE COURT PHILADELPHIA, PA 19106		
COMMONWEALTH MORTGAGE ASSURANCE COMPANY VICE PRESIDENT, LOSS MITIGATION	05/09/95	500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
FRANCIS J. JOHNSON 5805 FLINTSHIRE LANE DALLAS, TX 75252-5132		
COMMONWEALTH MORTGAGE ASSURANCE COMPANY SOUTHWESTERN REGIONAL SALES MANAGER	05/08/95	500.00

Aggregate Year-to-Date > \$ 500.00

SPECIMEN



NAME OF COMMITTEE (in full)  
COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
KAREN L. GLADSTONE 1742 F. SALT SAGE DRIVE P-GENTX, AZ 85048  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR ACCOUNT EXECUTIVE	05/08/95	200.00

Aggregate Year-to-Date > \$ 200.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
G. MARSHALL CARTER 8104 HAYMARKET LANE RALEIGH, NC 27615  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR ACCOUNT EXECUTIVE	05/08/95	300.00

Aggregate Year-to-Date > \$ 300.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
HERBERT WENDER 16 WOOD GLEN WAY BODNTON, NJ 07005  CMAC INVESTMENT CORPORATION CHAIRMAN OF THE BOARD OF DIRECTORS	05/08/95	1,000.00

Aggregate Year-to-Date > \$ 1,000.00

**SPECIMEN**

NAME OF COMMITTEE (in full)  
 COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm.dd.yy)	Amount of Each Receipt this Period
MARSH GORDON 9250 OLDE HICKORY CIRCLE FT. MYERS, FL 33912  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR ACCOUNT EXECUTIVE	05/08/95	250.00

Aggregate Year-to-Date > \$ 250.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm.dd.yy)	Amount of Each Receipt this Period
SUSAN KRUPP 40 VAN BUREN STREET FREEPORT, NY 11520  COMMONWEALTH MORTGAGE ASSURANCE COMPANY NORTHERN REGIONAL UNDERWRITING MANAGER	05/09/95	500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm.dd.yy)	Amount of Each Receipt this Period
BONNIE WALKER 5224 BECKINGTON LANE DALLAS, TX 75287-5418  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR ACCOUNT EXECUTIVE	05/09/95	200.00

Aggregate Year-to-Date > \$ 200.00

SPECIMEN

NAME OF COMMITTEE (in full)

COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
DAVID M. ACQUITTI 606 OAKLAND ROYAL OAK, MI 48067		
COMMONWEALTH MORTGAGE ASSURANCE COMPANY ACCOUNT EXECUTIVE	05/16/95	200.00

Aggregate Year-to-Date > \$ 200.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
DAVID B. BOOTH 111 W. AVENIDA CORDOBA SAN CLEMENTE, CA 92672		
COMMONWEALTH MORTGAGE ASSURANCE COMPANY WESTERN REGIONAL SALES MANAGER	05/02/95	200.00
	05/08/95	400.00

SPECIMEN

Aggregate Year-to-Date > \$ 600.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
FRANK P. FILIPPS 252 RAVENSLIFF ST. DAVIDS, PA 19087		
COMMONWEALTH MORTGAGE ASSURANCE COMPANY CHAIRMAN, PRESIDENT AND CHIEF EXECUTIVE OFFICER	05/08/95	1,000.00

Aggregate Year-to-Date > \$ 1,000.00

NAME OF COMMITTEE (in full)  
 COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
HARRY A. LEVINE P.O. BOX 305 JERICHO, NY 11753  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR VICE PRESIDENT, SALES	05/02/95	1,000.00

Aggregate Year-to-Date > \$ 1,000.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
EATHY S. GARRETT 2340 MIRACLE DRIVE INDIANAPOLIS, IN 46237  COMMONWEALTH MORTGAGE ASSURANCE COMPANY ACCOUNT EXECUTIVE	05/15/95	200.00

SPECIMEN

Aggregate Year-to-Date > \$ 200.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
NICHOLAS C. COSTAS 88 COPPERMINE ROAD TOPSFIELD, MA 01983  COMMONWEALTH MORTGAGE ASSURANCE COMPANY NORTHERN REGIONAL SALES MANAGER	05/05/95	600.00

Aggregate Year-to-Date > \$ 600.00

NAME OF COMMITTEE (in full)  
 COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
WILLIAM S. WOODRUFF 1305 WASHINGTON STREET, SO. NORTHFIELD, MN 55057  COMMONWEALTH MORTGAGE ASSURANCE COMPANY ACCOUNT EXECUTIVE	05/16/95	200.00

Aggregate Year-to-Date > \$ 200.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
SHARON L. CROWTHER 8823 BIRD COURT FOUNTAIN VALLEY, CA 92708  COMMONWEALTH MORTGAGE ASSURANCE COMPANY WESTERN REGIONAL UNDERWRITING MANAGER	05/16/95	300.00

SPECIMEN

Aggregate Year-to-Date > \$ 300.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
DENNY R. WALKINS 1145 WIGGT LANE WALNUT CREEK, CA 94598  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR ACCOUNT EXECUTIVE	05/10/95	250.00

Aggregate Year-to-Date > \$ 250.00

TOTAL This Period	11,350.00
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NAME OF COMMITTEE (in full)  
 COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
ROBERT A. SCHIMONY 177 CARDINAL ROAD CHALFONT, PA 18914  COMMONWEALTH MORTGAGE ASSURANCE COMPANY DIRECTOR OF SERVICING SALES	05/02/95	25.00

Aggregate Year-to-Date > \$ 25.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
TIMOTHY W. HUNTER, ESQ. 1009 ANNIN STREET PHILADELPHIA, PA 19147  COMMONWEALTH MORTGAGE ASSURANCE COMPANY ASST. SECRETARY & ASSOCIATE GENERAL COUNSEL	05/02/95	100.00

SPECIMEN

Aggregate Year-to-Date > \$ 100.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
MICHELE P. RIOGA 4410 TOWNSHIP LINE ROAD DREXEL HTLL, PA 19026  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR ACCOUNTANT, PLANNING AND BUDGETS	05/04/95	75.00

Aggregate Year-to-Date > \$ 75.00

NAME OF COMMITTEE (in full)  
 COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm.dd.yy)	Amount of Each Receipt this Period
TAMI A. BOHM 1602 LINCOLN DRIVE EAST AMBLER, PA 19002  COMMONWEALTH MORTGAGE ASSURANCE COMPANY COMPLIANCE ADMINISTRATOR & ASST. SECRETARY	05/08/95	50.00

Aggregate Year-to-Date > \$ 50.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm.dd.yy)	Amount of Each Receipt this Period
ANTHONY G. SHORE, ESQ. 7836 SPRING AVENUE ELKINS PARK, PA 19117  COMMONWEALTH MORTGAGE ASSURANCE COMPANY COUNSEL	05/08/95	100.00

Aggregate Year-to-Date > \$ 100.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm.dd.yy)	Amount of Each Receipt this Period
DAVID S. NEUSCHWANDER 1419 DERSTINE ROAD HATFIELD, PA 19440  COMMONWEALTH MORTGAGE ASSURANCE COMPANY CORPORATE CASH MANAGER	05/08/95	100.00

Aggregate Year-to-Date > \$ 100.00

SPECIMEN

NAME OF COMMITTEE (in full)  
 COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
SCOTT G. SCHULSTAD 321 IRIS AVENUE CORONA DEL MAR, CA 92525  COMMONWEALTH MORTGAGE ASSURANCE COMPANY ASST. VICE PRESIDENT, LOAN WORKOUT MANAGER	05/08/95	100.00

Aggregate Year-to-Date > \$ 100.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
DEBORAH A. CONROY 805 LITWA LANE ASTON, PA 19014  COMMONWEALTH MORTGAGE ASSURANCE COMPANY ASST. VICE PRESIDENT/ASST. CONTROLLER	05/09/95	150.00

SPECIMEN

Aggregate Year-to-Date > \$ 150.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
DENISE L. DESIOVANNI 3443 CENTRAL AVENUE HUNTINGTON VALLEY, PA 19006  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SALES REPRESENTATIVE	05/02/95	100.00

Aggregate Year-to-Date > \$ 100.00



NAME OF COMMITTEE (in full)  
 COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
LISA B. EARNHARDT 140 TODD DRIVE, NW CONCORD, NC 28025  COMMONWEALTH MORTGAGE ASSURANCE COMPANY CHARLOTTE UNDERWRITER	05/25/95	1.00

Aggregate Year-to-Date > \$ 1.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
A. TERRY BASKIN 1100 SAFETY HARBOR COVE OLD HICKORY, TN 37138  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR ACCOUNT EXECUTIVE	05/15/95	150.00

SPECIMEN

Aggregate Year-to-Date > \$ 150.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
KAREN CRAGO 10113 N. PONDEROSA GROVE FRESNO, CA 93720  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR ACCOUNT EXECUTIVE	05/16/95	100.00

Aggregate Year-to-Date > \$ 100.00

NAME OF COMMITTEE (in full)  
COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
SHARON L. SCHUCK-SKY 210 HEMLOCK DRIVE MCMURRAY, PA 15317  COMMONWEALTH MORTGAGE ASSURANCE COMPANY ACCOUNT EXECUTIVE	05/18/95	100.00

Aggregate Year-to-Date > \$ 100.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
ROBERT V. RADICIONI 413 LYCEUM AVENUE PHILADELPHIA, PA 19128  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SR. TAX ACCOUNTANT	05/12/95	75.00

Aggregate Year-to-Date > \$ 75.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
JULIE W. CLARK 246 STRAWBRIDGE LANE MILTCA HILL, NJ 08057  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR ACCOUNTANT/ACCT PAYABLE SUPERVISOR	05/12/95	75.00

Aggregate Year-to-Date > \$ 75.00

**SPECIMEN**

NAME OF COMMITTEE (in full)  
 COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
HOWARD H. HAMVILLE 841 NW 49 WAY MARGATE, FL 33063  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR LOAN WORKOUT SPECIALIST	05/11/95	7.00
	05/25/95	7.00

Aggregate Year-to-Date > \$ 14.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
CHRISTINA E. OAKLEY 8392 DONCASTER DRIVE HUNTINGTON BEACH, CA 92646  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR ACCOUNT EXECUTIVE	05/11/95	10.00
	05/25/95	10.00

Aggregate Year-to-Date > \$ 20.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
MALLORY J. LEE 1412 E. BARRINGER STREET PHILADELPHIA, PA 19150  COMMONWEALTH MORTGAGE ASSURANCE COMPANY TREVOSE BRANCH UNDERWRITING MANAGER	05/11/95	10.00
	05/25/95	10.00

Aggregate Year-to-Date > \$ 20.00

SPECIMEN

NAME OF COMMITTEE (in full)  
 COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
JOHN D. CHLUDZENSKI 19507 GALENA PLACE TAMPA, FL 33626  COMMONWEALTH MORTGAGE ASSURANCE COMPANY TAMPA BRANCH UNDERWRITING MANAGER	05/11/95	5.00
	05/25/95	5.00

Aggregate Year-to-Date > \$ 10.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
WILLIAM J. MARLIN 812 SAND WEDGE COURT WARRINGTON, PA 18976  COMMONWEALTH MORTGAGE ASSURANCE COMPANY DIRECTOR, HUMAN RESOURCES	05/11/95	10.00
	05/25/95	10.00

SPECIMEN

Aggregate Year-to-Date > \$ 20.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
JOHN M. BALLARD 4023 NW 69TH TERRACE CORAL SPRINGS, FL 33065  COMMONWEALTH MORTGAGE ASSURANCE COMPANY ASST VICE PRESIDENT/LOAN WORKOUT MANAGER	05/25/95	10.00

Aggregate Year-to-Date > \$ 10.00

NAME OF COMMITTEE (in full)

COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm.dd.yy)	Amount of Each Receipt this Period
KAREN E. ELLSWORTH 1 REDWOOD COURT ROCKLAND, MA 02370  COMMONWEALTH MORTGAGE ASSURANCE COMPANY ACCOUNT EXECUTIVE	05/25/95	8.00

Aggregate Year-to-Date > \$ 8.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm.dd.yy)	Amount of Each Receipt this Period
JOHN E. FISCHER 28 SKY VIEW LANE HEM CANAAN, CT 06840  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR ACCOUNT EXECUTIVE	05/25/95	10.00

SPECIMEN

Aggregate Year-to-Date > \$ 10.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm.dd.yy)	Amount of Each Receipt this Period
KATHERINE M. KELLY 3537 BAY DRIVE BALTIMORE, MD 21220  COMMONWEALTH MORTGAGE ASSURANCE COMPANY TOWSON BRANCH UNDERWRITING MANAGER	05/25/95	8.00

Aggregate Year-to-Date > \$ 8.00

NAME OF COMMITTEE (in full)  
COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
EDWARD T. BEAN 2323 CHARLOTTE DRIVE CHARLOTTE, NC 28203  COMMONWEALTH MORTGAGE ASSURANCE COMPANY ACCOUNT EXECUTIVE	05/25/95	10.00
Aggregate Year-to-Date > \$ 10.00		

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
JULIA P. WEST 5916 N. 3RD STREET PHILADELPHIA, PA 19120  COMMONWEALTH MORTGAGE ASSURANCE COMPANY ASST. MANAGER, LOAN WORKOUTS DEPARTMENT	05/25/95	10.00
Aggregate Year-to-Date > \$ 10.00		

SPECIMEN

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
ROSEMARIE MARCUM 1596 LORRAINE AVENUE COLUMBUS, OH 43235  COMMONWEALTH MORTGAGE ASSURANCE COMPANY COLUMBUS BRANCH UNDERWRITING MANAGER	05/25/95	5.00
Aggregate Year-to-Date > \$ 5.00		

NAME OF COMMITTEE (in full)

COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
SANDRA J. TODD 10221 WATERBROOK LANE CHARLOTTE, NC 28277  COMMONWEALTH MORTGAGE ASSURANCE COMPANY CHARLOTTE BRANCH UNDERWRITING MANAGER	05/25/95	5.00
Aggregate Year-to-Date > \$		5.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
KATHLEEN M. LUTES 8644 SUMMERCREEK LANE HUNTERSVILLE, NC 28078  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR UNDERWRITER	05/25/95	2.00
Aggregate Year-to-Date > \$		7.00

SPECIMEN

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
SHARON E. MITCHELL 8229 NW 115TH OKLAHOMA CITY, OK 73162  COMMONWEALTH MORTGAGE ASSURANCE COMPANY OKLAHOMA BRANCH UNDERWRITING MANAGER	05/25/95	5.00
Aggregate Year-to-Date > \$		5.00

NAME OF COMMITTEE (In Full)  
 COMMONWEALTH MORTGAGE ASSURANCE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
HOLLY HALE 4133 FRANKLIN PARK STERLING HEIGHTS, MI 48310  COMMONWEALTH MORTGAGE ASSURANCE COMPANY DETROIT BRANCH UNDERWRITING MANAGER	05/25/96	8.00

Aggregate Year-to-Date > \$ 8.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
CHRISTINE C. TARTAGLIA 28 FOX HOLLOW-DESMOND RUN SICKLERVILLE, NJ 08081  COMMONWEALTH MORTGAGE ASSURANCE COMPANY EAST CONTRACT UNDERWRITING MANAGER	05/25/96	10.00

SPECIMEN

Aggregate Year-to-Date > \$ 10.00

Full Name, Mailing Address and ZIP Code Name of Employer/Occupation	Date (mm,dd,yy)	Amount of Each Receipt this Period
T. CRAIG HOUSTON, JR. 1901 RIDGE ROAD REISTERSTOWN, MD 21136  COMMONWEALTH MORTGAGE ASSURANCE COMPANY SENIOR ACCOUNT EXECUTIVE	05/25/96	4.00

Aggregate Year-to-Date > \$ 4.00

TOTAL This Period 1,480.00



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.

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DATE OF RECEIPT

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and/or DATE OF RECEIPT

E.S.  
PREPARER

6/19/95  
DATE PREPARED