

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) McDonald's Corporation Political Action Committee <small>ADDRESS (number and street) Check if different than previously reported</small> McDonald's Plaza <small>CITY, STATE and ZIP CODE</small> Oak Brook, IL 60521	<div style="text-align: right; font-size: small;"> SEP 23 0 52 AM '93 </div> 2. FEC IDENTIFICATION NUMBER #C000063164 3. 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: <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> February 20</td> <td><input type="checkbox"/> June 20</td> <td><input type="checkbox"/> October 20</td> </tr> <tr> <td><input type="checkbox"/> March 20</td> <td><input type="checkbox"/> July 20</td> <td><input type="checkbox"/> November 20</td> </tr> <tr> <td><input type="checkbox"/> April 20</td> <td><input type="checkbox"/> August 20</td> <td><input type="checkbox"/> December 20</td> </tr> <tr> <td><input type="checkbox"/> May 20</td> <td><input checked="" type="checkbox"/> September 20</td> <td><input type="checkbox"/> January 31</td> </tr> </table> _____ Twelfth day report preceding _____ <small>(Type of Election)</small> election on _____ in the State of _____ _____ Thirtieth day report following the General Election on _____ in the State of _____ (b) Is this Report an Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<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 checked="" type="checkbox"/> September 20	<input type="checkbox"/> January 31
<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 checked="" type="checkbox"/> September 20	<input type="checkbox"/> January 31											

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>8-01-93</u> through <u>8-31-93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ 61,294
(b) Cash on Hand at Beginning of Reporting Period	\$ 55,681	
(c) Total Receipts (from Line 18)	\$ 26,475	\$ 79,961
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 82,156	\$ 141,255
7. Total Disbursements (from Line 30)	\$ 1,500	\$ 60,599
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 80,656	\$ 80,656
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
900 E Street, NW
Washington, DC 20463
Toll Free 800-426-9530
Local 202-375-3120

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
Michael L. Conley

Signature of Treasurer
Michael L. Conley

Date
9-20-93

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 McDonald's Corporation Political Action Committee	REPORT COVERING PERIOD FROM 8-01-93 TO 8-31-93	
	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).....	3,000	12,950
ii. Unitemized.....	23,475	66,300
iii. Total..... (add i and ii) >	26,475	79,250
b. Political Party Committees.....		
c. Other Political Committees (such as PACs).....		
d. Total Contributions..... (add a ii, b and c) >	26,475	79,250
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.).....	- 0 -	711
18. Transfers from Nonfederal Account for Joint Activity.....		
19. Total Receipts..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	26,475	79,961
20. Total Federal Receipts..... (subtract line 18 from line 19) >	26,475	79,961
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.....		
c. Total Operating Expenditures..... (Add a i, a ii, and b) >	- 0 -	- 0 -
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1,500	60,500
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. Individual/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.....	- 0 -	99
30. Total Disbursements..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	1,500	60,599
31. Total Federal Disbursements..... (subtract line 21 a ii from line 30) >	1,500	60,599
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d).....	26,475	79,250
33. Total Contribution Refunds (from line 28d).....		
34. Net Contributions (other than loans)(subtract line 33 from 32).....	26,475	79,250
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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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules 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 committee.

NAME OF COMMITTEE (in Full)

McDonald's Corporation Political Action Committee

37393138613303

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul D. & Janet P. Schrage One Kroc Drive Oak Brook, IL 60521	McDonald's Corporation One Kroc Drive Oak Brook, IL 60521	8-3-93	\$ 250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: McDonald's Employee Aggregate Year-to-Date > \$ 250		
B. Full Name, Mailing Address and ZIP Code Roger & Linda Delph 5727 W. Sweet Drive Visalia, CA 93291	McDonald's Rest. 3636 S. Mooney Blvd. Visalia, CA 93277	8-03-93	\$ 600
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: McDonald's Licensee Aggregate Year-to-Date > \$ 600		
C. Full Name, Mailing Address and ZIP Code James A. Skinner One Kroc Drive Oak Brook, IL 60521	McDonald's Corporation One Kroc Drive Oak Brook, IL 60521	8-10-93	\$ 400
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: McDonald's Employee Aggregate Year-to-Date > \$ 400		
D. Full Name, Mailing Address and ZIP Code Phil Henoch P. O. Box 548 Rochester, MN 55903	McDonald's Rest. 1306 Apache Drive Rochester, MN 55901	8-15-93	\$ 500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: McDonald's Licensee Aggregate Year-to-Date > \$ 500		
E. Full Name, Mailing Address and ZIP Code Steve Delamater 1520 Lincoln Way Chambersburg, PA 17201	McDonald's Rest. 95 Bedford Square Everett, PA 15537	8-15-93	\$1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: McDonald's Licensee Aggregate Year-to-Date > \$1,000		
F. Full Name, Mailing Address and ZIP Code Douglas Doherty 301 Country Club Drive Williamsport, PA 17701	McDonald's Rest. 1730 E. 3rd St. Williamsport, PA 17701	8-15-93	\$ 250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: McDonald's Licensee Aggregate Year-to-Date > \$ 250		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	\$3,000

**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

9-17-93

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

JMH

PREPARER

9-23-93

DATE PREPARED

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