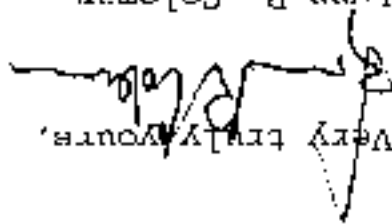


Enclosure

Lynn R. Coleman
Very truly yours,


Please date-stamp the extra copy of the amended report for our files.

Enclosed please find the amended summary page from the July 15 Quarterly Report for the Skadden Arps Political Action Committee, ID # C00232629.

Dear Sir or Madam:

Re: ID # C00232629

Federal Election Commission
999 R Street, NW
Room 824
Washington, D.C. 20563

BY HAND

September 29, 1994

SEATTLE
SAN FRANCISCO
NEW YORK
WASHINGTON
LOS ANGELES
NEWARK
NEW YORK
SAN FRANCISCO
WILMINGTON
SEATTLE
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SYDNEY
TOKYO
TORONTO

SEP 30 12 58 PM '94

(202) 371-7000

WASHINGTON, D.C. 20005-2111

1440 NEW YORK AVENUE, N.W.

SKADDEN, ARPS, SLATE, MEAGHER & FLOW

FAX: 202-371-7766
FIRST CLASS
PERMIT NO. 2210

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee (Summary Page)

USE FEC MAKING LABEL OR TYPE ON PRINT

1. NAME OF COMMITTEE (in full)		Skadden Arps Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported		1440 New York Avenue, NW,	
CITY, STATE AND ZIP CODE		Washington, D.C. 20005	
2. FEC IDENTIFICATION NUMBER		C00232629	
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 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

Twelve month report preceding _____ 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

5. Covering Period 4/1/94 through 6/30/94

6. (a) Cash on Hand January 1, 1994 \$ 76.29

(b) Cash on Hand at Beginning of Reporting Period \$ 17,390.29

(c) Total Receipts (from Line 18) \$ 49,885.00

(d) Subtotal (add Lines 6(b) and 8(c) for Column A and Lines 6(a) and 8(c) for Column B) \$ 67,275.29

7. Total Disbursements (from Line 20) \$ 60,500.00

8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) \$ 6,775.29

9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) \$ 0

10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) \$ 0

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

Type or Print Name of Treasurer Lynn R. Coleman

Signature of Treasurer *[Signature]*

Date 09/29/94

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §487g.

SEP 30 12 53 PM '94

<p>Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS</p> <p>The Commission has added this page to the end of this filing to indicate how it was received.</p>	
<input checked="" type="checkbox"/>	Hand Delivered
<input type="checkbox"/>	First Class Mail
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<input type="checkbox"/>	Received from the House Office of Records and Registration
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<input type="checkbox"/>	Other (Specify):
<input type="checkbox"/>	POSTMARKED
<input type="checkbox"/>	DATE OF RECEIPT
<input type="checkbox"/>	PREPARED
<input type="checkbox"/>	DATE PREPARED

MMR
9-30-94

9-30-94

9-30-94

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