

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

FEB 3 12 40 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <i>Nelson Mullins Riley & Scarborough, L.L.P. Federal Political Committee</i>	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <i>PO Box 11070 1330 Lady Street, 3rd Floor</i>	2. FEC IDENTIFICATION NUMBER <i>C-00278895</i>
CITY, STATE and ZIP CODE <i>Columbia SC 29201</i>	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:
 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	<i>8-1-97</i> through <i>12-31-97</i>		
6. (a) Cash on Hand January 1, 19 <i>97</i>			\$ <i>160.00</i>
(b) Cash on Hand at Beginning of Reporting Period		\$ <i>4636.00</i>	
(c) Total Receipts (from Line 19)		\$ <i>4000.00</i>	\$ <i>9000.00</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ <i>8636.00</i>	\$ <i>9160.00</i>
7. Total Disbursements (from Line 30)		\$ <i>2000.00</i>	\$ <i>2524.00</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ <i>6636.00</i>	\$ <i>6636.00</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ <i>- 0 -</i>	For further information contact: Federal Election Commission 888 E Street, NW Washington, DC 20463 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)		\$ <i>- 0 -</i>	

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
Kevin L. Bagwell, CPA

Signature of Treasurer  Date *1-30-98*

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	REPORT COVERING PERIOD		
<i>Nelson Mullins Riley & Scarborough LLP Federal Political Committee</i>	FROM <i>8-1-97</i>	TO <i>12-31-97</i>	
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)	1303	2737	11(a)
ii. Unitemized	2697	6263	11(b)
iii. Total	4000	9000	11(c)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions	4000	9000	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts	4000	9000	19
20. Total Federal Receipts	4000	9000	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)
ii. Non-Federal Share		24	21(b)
b. Other Federal Operating Expenditures		24	21(c)
c. Total Operating Expenditures			22
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	2000	2500	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds			28(d)
29. Other Disbursements			29
30. Total Disbursements	2000	2524	30
31. Total Federal Disbursements	2000	2524	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	4000	9000	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	4000	9000	34
35. Total Federal Operating Expenditures			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures			37

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)			
<i>Nelson Mullins Riley + Scarborough LLP Federal Political Committee</i>			
A. Full Name, Mailing Address and ZIP Code <i>Dwight F. Drake</i> <i>PO Box 11070</i> <i>Columbia SC 29211</i>	Name of Employer <i>Nelson Mullins Riley + Scarborough</i>	Date (month, day, year) <i>Payroll deduction</i>	Amount of Each Receipt this Period <i>\$442.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>Attorney</i>	Aggregate Year-to-Date > \$ <i>928.00</i>	
B. Full Name, Mailing Address and ZIP Code <i>Edward E. Poliakoff</i> <i>PO Box 11070</i> <i>Columbia SC 29211</i>	Name of Employer <i>Nelson Mullins Riley + Scarborough</i>	Date (month, day, year) <i>Payroll deduction</i>	Amount of Each Receipt this Period <i>\$419.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>Attorney</i>	Aggregate Year-to-Date > \$ <i>881.00</i>	
C. Full Name, Mailing Address and ZIP Code <i>George B. Wolfe</i> <i>PO Box 11070</i> <i>Columbia SC 29211</i>	Name of Employer <i>Nelson Mullins Riley + Scarborough</i>	Date (month, day, year) <i>Payroll deduction</i>	Amount of Each Receipt this Period <i>\$442.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>Attorney</i>	Aggregate Year-to-Date > \$ <i>928.00</i>	
D. 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 > \$	
E. 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 > \$	
F. 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 > \$	
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)			<i>\$1303.00</i>
TOTAL This Period (last page this line number only)			<i>\$1303.00</i>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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)

Nelson Mullins Riley & Scarborough LLP Federal Political Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Tommy Moore for Congress C/o Bob Knight 1323 Pendleton Street Columbia SC 29201</i>	<i>Contribution</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>8/20/97</i>	<i>\$1000.00</i>
<i>Fritz Hollings for US Senate Committee PO Box 135 Charleston SC 29401</i>	<i>Contribution</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10/7/97</i>	<i>\$1000.00</i>
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)

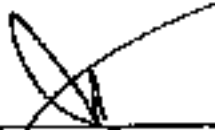
\$2000.00

TOTAL This Period (last page this line number only)

\$2000.00

**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 type="checkbox"/> Hand Delivered	Date of Receipt
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