

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 31 1 02 PM '97

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Dickstein Shapiro Morin & Oshinsky, LLP PAC

ADDRESS (number and street) Check if different than previously reported
2101 L Street, NW

CITY, STATE and ZIP CODE
Washington, DC 20037

2. FEC IDENTIFICATION NUMBER
C00110197

3. 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 |

- 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 | COLUMN B |
|--|--|-------------|-----------------------|
| 5. Covering Period <u>07/01/97</u> through <u>06/30/97</u> | | This Period | Calendar Year-to-Date |
| 6. (a) | Cash on Hand January 1, 1997 | | \$ 5003.81 |
| (b) | Cash on Hand at Beginning of Reporting Period | \$ 5003.81 | |
| (c) | Total Receipts (from line 10) | \$ 34809.50 | \$ 34809.50 |
| (d) | Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | \$ 39813.31 | \$ 39813.31 |
| 7. | Total Disbursements (from Line 30) | \$ 22500.00 | \$ 22500.00 |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | \$ 17313.31 | \$ 17313.31 |
| 9. | Debits and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | \$ | |
| 10. | Debits and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | \$ | |

For further information contact:
Federal Election Commission
899 E Street, NW
Washington, DC 20463
Toll Free 800-424-9630
Local 202-219-3420

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
L. Andrew Bausher, Treasurer

Signature of Treasurer

Date
7/31/97

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 <u>Dickstein Shapiro Marin & Goshinsky, LLP PCC</u> | REPORT COVERING PERIOD | |
|---|-------------------------------|---------------------------|
| | FROM <u>06/30/97</u> | TO <u>97</u> |
| | COLUMN A Total This Period | COLUMN B Calendar Year |
| I. Receipts | | |
| 11. Contributions (other than loans) From: | | |
| a. Individuals/Persons Other Than Political Committees | | |
| i. Itemized (use Schedule A) | 34809.50 | 34809.50 |
| ii. Unitemized | | |
| iii. Total (add i and ii) | 34809.50 | 34809.50 |
| b. Political Party Committees | | |
| c. Other Political Committees (such as PACs) | | |
| d. Total Contributions (add a ii, b and c) | 34809.50 | 34809.50 |
| 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.) | | |
| 18. Transfers from Nonfederal Account for Joint Activity | | |
| 19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) | 34809.50 | 34809.50 |
| 20. Total Federal Receipts (subtract line 16 from line 19) | 34809.50 | 34809.50 |
| 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 | -0- | -0- |
| 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 | 22500.00 | 22500.00 |
| 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. Individuals/Persons Other Than Political Committees | -0- | -0- |
| b. Political Party Committees | | |
| c. Other Political Committees (such as PACs) | | |
| d. Total Contribution Refunds (Add a, b and c) | -0- | -0- |
| 29. Other Disbursements | | |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) | 22500.00 | 22500.00 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) | 22500.00 | 22500.00 |
| III. Net Contributions/Operating Expenditures | | |
| 32. Total Contributions (other than loans)(from line 11d) | 34809.50 | 34809.50 |
| 33. Total Contribution Refunds (from line 28d) | -0- | -0- |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 34809.50 | 34809.50 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) | -0- | -0- |
| 36. Offsets to Operating Expenditures (from line 15) | | |
| 37. Net Operating Expenditures (subtract line 36 from 35) | -0- | -0- |

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page PAGE 7 OF 7 FOR LINE NUMBER 111

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Dickstein Shapiro Morin & Oshinsky, LLP PAC

FEC ID No. C00110197

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|-------------------------|------------------------------------|
| James Andrew Jackson 9309 Clanbrook Ct. Fairfax, VA 22031 | Dickstein Shapiro Morin & Oshinsky LLP "DSMOLLP" Occupation Attorney | 02/24/97 | 162.50 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Applicable To: > \$ | | |
| William D. Kingery, Jr. 7211 Rollingwood Dr. Chevy Chase, MD 20815 | DSMOLLP Occupation Attorney | 02/24/97 | 512.50 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Applicable To: > \$ | | |
| M J Mintz 1906 Glen Dr. Alexandria, VA 22307-1136 | DSMOLLP Occupation Attorney | 03/03/97 | 975.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Applicable To: > \$ | | |
| Emanuel Faust, Jr. 6500 Crosswoods Dr. Falls Church, VA 22044-1101 | DSMOLLP Occupation Attorney | 03/11/97 | 337.50 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Applicable To: > \$ | | |
| Paul B. Brax 9505 Barring Tree Rd. Bethesda, MD 20817 | DSMOLLP Occupation Attorney | 05/06/97 | 438.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Applicable To: > \$ | | |
| Sidney Dickstein 2101 L Street, NW Washington, DC 20037 | DSMOLLP Occupation Attorney | 05/06/97 | 863.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Applicable To: > \$ | | |
| Patrick W. Lynch 725 Lawson St. McLean, VA 22101 | DSMOLLP Occupation Attorney | 05/06/97 | 263.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Applicable To: > \$ | | |

SUBTOTAL of Receipts This Page (optional) 3551.50

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

| | | |
|--|------|----|
| Use separate schedule for each category of the Detailed Summary Page | CODE | OF |
| | 2 | 7 |
| FOR LINE NUMBER | | |
| 1111 | | |

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky, LLP PAC

FEC ID No. C00110197

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|-------------------------|------------------------------------|
| Ira R. Mitzner 5500 Poillard Rd., Bethesda, MD 20816-3329 | Dickstein Shapiro Morin & Oshinsky LLP "DSMO LLP" Occupation Attorney | 05/06/97 | 1130.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Agree to file <input checked="" type="checkbox"/> \$ | | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Jerold Oshinsky 2354 N Lincoln St. Arlington, VA 22207-3862 | DSMO LLP Occupation Attorney | 05/06/97 | 5000.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Agree to file <input checked="" type="checkbox"/> \$ | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Woody K. Peterson 4700 Connecticut Ave. NW #61C Washington, DC 20008 | DSMO LLP Occupation Attorney | 05/06/97 | 700.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Agree to file <input checked="" type="checkbox"/> \$ | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Rebecca L. Wright 3101 New Mexico Ave., NW #236 Washington, DC 20016 | DSMO LLP Occupation Attorney | 05/06/97 | 875.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Agree to file <input checked="" type="checkbox"/> \$ | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Leslie Kaplan 2101 L Street, NW Washington, DC 20037 | DSMO LLP Occupation Attorney | 05/13/97 | 290.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Agree to file <input checked="" type="checkbox"/> \$ | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Joseph Tydings 2101 L Street, NW Washington, DC 20037 | DSMO LLP Occupation Attorney | 05/13/97 | 1050.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Agree to file <input checked="" type="checkbox"/> \$ | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Sallie Helm 2101 L Street, NW Washington, DC 20037 | DSMO LLP Occupation Attorney | 06/02/97 | 438.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Agree to file <input checked="" type="checkbox"/> \$ | | |

SUBTOTAL of Receipts This Page (optional) 3481.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule PAGE OF
for each category of the 3 7
Detailed Summary Page FOR LINE NUMBER
11a1

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky, LLP PAC

FEC ID No. C0110197

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|-------------------------|------------------------------------|
| Lee A. Alexander 2101 L Street, NW Washington, DC 20037 | Dickstein Shapiro Morin & Oshinsky LLP "DSMOLLP" Occupation: Attorney | 06/06/97 | 300.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregates To: > \$ | | |
| Angelo V. Arcadipane 2101 L Street, NW Washington, DC 20037 | DSMOLLP Occupation: Attorney | 06/06/97 | 1750.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregates To: > \$ | | |
| George T. Boggs 2101 L Street, NW Washington, DC 20037 | DSMOLLP Occupation: Attorney | 06/06/97 | 350.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregates To: > \$ | | |
| Henry C. Cashen, II 2101 L Street, NW Washington, DC 20037 | DSMOLLP Occupation: Attorney | 06/06/97 | 1050.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregates To: > \$ | | |
| Leslie R. Cohen 2101 L Street, NW Washington, DC 20037 | DSMOLLP Occupation: Attorney | 06/06/97 | 250.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregates To: > \$ | | |
| Howard N. Feldman 2101 L Street, NW Washington, DC 20037 | DSMOLLP Occupation: Attorney | 06/06/97 | 200.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregates To: > \$ | | |
| G. Michael Green 2101 L Street, NW Washington, DC 20037 | DSMOLLP Occupation: Attorney | 06/06/97 | 613.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregates To: > \$ | | |

SUBTOTAL of Receipts This Page (optional) 4517.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page
 PAGE 4 OF 7
 FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky, LLP PAC

FEC ID No. C05110197

| A. Full Name, Mailing Address and ZIP Code Jon D. Grossman 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Dickstein Shapiro Morin & Oshinsky LLP "DSMOLLP" Occupation Attorney Aggregate Year-to-Date > \$ | Date (month, day, year) 06/06/97 | Amount of Each Receipt this Period 350.00 |
|---|---|-------------------------------------|--|
| B. Full Name, Mailing Address and ZIP Code Robert J. Higgins 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer DSMOLLP Occupation Attorney Aggregate Year-to-Date > \$ | Date (month, day, year) 06/06/97 | Amount of Each Receipt this Period 814.00 |
| C. Full Name, Mailing Address and ZIP Code Gary M. Hoffman 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer DSMOLLP Occupation Attorney Aggregate Year-to-Date > \$ | Date (month, day, year) 06/06/97 | Amount of Each Receipt this Period 763.00 |
| D. Full Name, Mailing Address and ZIP Code Bruce R. Holcomb 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer DSMOLLP Occupation Attorney Aggregate Year-to-Date > \$ | Date (month, day, year) 06/06/97 | Amount of Each Receipt this Period 798.00 |
| E. Full Name, Mailing Address and ZIP Code Jeffrey M. Johnson 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer DSMOLLP Occupation Attorney Aggregate Year-to-Date > \$ | Date (month, day, year) 06/06/97 | Amount of Each Receipt this Period 875.00 |
| F. Full Name, Mailing Address and ZIP Code Peter H. Jost 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer DSMOLLP Occupation Attorney Aggregate Year-to-Date > \$ | Date (month, day, year) 06/05/97 | Amount of Each Receipt this Period 300.00 |
| G. Full Name, Mailing Address and ZIP Code James D. Kelly 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer DSMOLLP Occupation Attorney Aggregate Year-to-Date > \$ | Date (month, day, year) 06/06/97 | Amount of Each Receipt this Period 175.00 |

SUBTOTAL of Receipts This Page (optional) 4065.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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| NAME OF COMMITTEE (In Full) | | FEC ID No. | | Amount of Each Receipt this Period |
|---|--|-------------------------------------|------------------------------------|------------------------------------|
| Dickstein Shapiro Morin & Oshinsky, LLP PAC | | CD0110197 | | |
| A. Full Name, Mailing Address and ZIP Code Joel B. Kleiman 2101 L Street, NW Washington, DC 20037 | Name of Employer Dickstein Shapiro Morin & Oshinsky LLP "DSMOLLP" | Date (month, day, year) 06/06/97 | Amount of Each Receipt this Period | 1225.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggreg Year-To-Date > \$ | | |
| B. Full Name, Mailing Address and ZIP Code Joseph E. Kolick, Jr. 2101 L Street, NW Washington, DC 20037 | Name of Employer DSMOLLP | Date (month, day, year) 06/06/97 | Amount of Each Receipt this Period | 875.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggreg Year-To-Date > \$ | | |
| C. Full Name, Mailing Address and ZIP Code John T. Kotelly 2101 L Street, NW Washington, DC 20037 | Name of Employer DSMOLLP | Date (month, day, year) 06/06/97 | Amount of Each Receipt this Period | 875.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggreg Year-To-Date > \$ | | |
| D. Full Name, Mailing Address and ZIP Code Arthur J. LaFave, III 2101 L Street, NW Washington, DC 20037 | Name of Employer DSMOLLP | Date (month, day, year) 06/06/97 | Amount of Each Receipt this Period | 788.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggreg Year-To-Date > \$ | | |
| E. Full Name, Mailing Address and ZIP Code Daniel M. Litt 2101 L Street, NW Washington, DC 20037 | Name of Employer DSMOLLP | Date (month, day, year) 06/06/97 | Amount of Each Receipt this Period | 500.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggreg Year-To-Date > \$ | | |
| F. Full Name, Mailing Address and ZIP Code Frederick M. Lowther 2101 L Street, NW Washington, DC 20037 | Name of Employer DSMOLLP | Date (month, day, year) 06/06/97 | Amount of Each Receipt this Period | 2800.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggreg Year-To-Date > \$ | | |
| G. Full Name, Mailing Address and ZIP Code Matthew G. Maloney 2101 L Street, NW Washington, DC 20037 | Name of Employer DSMOLLP | Date (month, day, year) 06/06/97 | Amount of Each Receipt this Period | 321.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggreg Year-To-Date > \$ | | |
| SUBTOTAL of Receipts This Page (optional) | | | | 7384.00 |
| TOTAL This Period (last page this line number only) | | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full) **Dickstein Shapiro Morin & Oshinsky, LLP PAC** FEC ID No. C00110197

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|-------------------------|------------------------------------|
| Michael E. Nannes 2101 L Street, NW Washington, DC 20037 | Dickstein Shapiro Morin & Oshinsky LLP "DSMOLLP" | 06/06/97 | 963.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney Agree To Pledge <input checked="" type="checkbox"/> \$ | | |
| George R. Pitts 2101 L Street, NW Washington, DC 20037 | DSMOLLP | 06/06/97 | 350.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney Agree To Pledge <input checked="" type="checkbox"/> \$ | | |
| Ira H. Polon 2101 L Street, NW Washington, DC 20037 | DSMOLLP | 05/06/97 | 1925.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney Agree To Pledge <input checked="" type="checkbox"/> \$ | | |
| Adam Procujsky 2101 L Street, NW Washington, DC 20037 | DSMOLLP | 06/06/97 | 175.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney Agree To Pledge <input checked="" type="checkbox"/> \$ | | |
| Charles W. Saber 2101 L Street, NW Washington, DC 20037 | DSMOLLP | 06/06/97 | 798.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney Agree To Pledge <input checked="" type="checkbox"/> \$ | | |
| Kenneth M. Simon 2101 L Street, NW Washington, DC 20037 | DSMOLLP | 06/06/97 | 735.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney Agree To Pledge <input checked="" type="checkbox"/> \$ | | |
| James Springer 2101 L Street, NW Washington, DC 20037 | DSMOLLP | 06/06/97 | 700.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney Agree To Pledge <input checked="" type="checkbox"/> \$ | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 5636.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
 Dickstein Shapiro Morin & Oshinsky, LLP PAC FEC ID No. C00110197

| | | | |
|---|--|--|---|
| <p>A. Full Name, Mailing Address and ZIP Code Mark Thronson 2101 L Street, NW Washington, DC 20037</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer Dickstein Shapiro Morin & Oshinsky LLP "DSMOLLP" Occupation Attorney</p> <p>Aggregatable <input checked="" type="checkbox"/> \$</p> | <p>Date (month, day, year) 06/06/97</p> | <p>Amount of Each Receipt this Period 175.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer Occupation Aggregatable <input type="checkbox"/> \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer Occupation Aggregatable <input type="checkbox"/> \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer Occupation Aggregatable <input type="checkbox"/> \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer Occupation Aggregatable <input type="checkbox"/> \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer Occupation Aggregatable <input type="checkbox"/> \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer Occupation Aggregatable <input type="checkbox"/> \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) | 175.00 |
| TOTAL This Period (last page this line number only) | 34809.50 |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Detailed Summary Page
 PAGE 1 OF 3
 FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky, LLP PAC

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Citizens Committee for Ernest F. Hollings P.O. Box 65271 Washington, DC 20035 | Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 01/14/97 | 1000.00 |
| Chris Cannon for Congress P.O. Box 711 Provo, Utah 84603-0711 | Debt Reduction Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) | 01/23/97 | 500.00 |
| Missourians for Kit Bond 507 Capitol Court, NE #100 Washington, DC 20002 | Re-election Campaign Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 02/12/97 | 1000.00 |
| Faircloth for Senate P.O. Box 26585 Raleigh, NC 27611-6585 | Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 02/26/97 | 1000.00 |
| Linder for Congress P.O. Box 942060 Charleston, GA 31141 | Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/04/97 | 1000.00 |
| Latham for Congress P.O. Box 174 Sioux City, IA 51102 | Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/05/97 | 500.00 |
| Campbell Victory Fund P.O. Box 480166 Denver, CO 80248 | Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/11/97 | 1000.00 |
| Friends of Chris Dodd 203 C Street, NE Washington, DC 20002 | Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 05/13/97 | 1000.00 |
| NACDS-FAC Attn: Shelagh Cooney 413 N. Lee Street Alexandria, VA 22314 | NACDS-FAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) | 05/13/97 | 1000.00 |

SUBTOTAL of Disbursements This Page (optional) 8000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule (PAGE DF
for each category of the 2 3
Detailed Summary Page
FOR LINE NUMBER
23

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NAME OF COMMITTEE (In Full)

Dickstein Shapiro Morin & Oshinsky, LLP PAC

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Contribution | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Goode for Congress P.O. Box 2884 Washington, DC 20013 | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 05/20/97 | 500.00 |
| B. Full Name, Mailing Address and ZIP Code The New Republican Majority Fund 228 S Washington St. Ste 220 Alexandria, VA 22314 | Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 05/28/97 | 5000.00 |
| C. Full Name, Mailing Address and ZIP Code Henry J. Hyde Defense Fund Trust 886 18th Street, NW Washington, DC 20016 | Purpose of Disbursement Defense Trust Fund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) | 05/28/97 | 1000.00 |
| D. Full Name, Mailing Address and ZIP Code Committee to Elect Mike McIntyre P.O. Box 1 Lumberton, NC 28358 | Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 05/29/97 | 500.00 |
| E. Full Name, Mailing Address and ZIP Code Friends of Jonathan Miller P.O. Box 21861 Lexington, KY 40522-1861 | Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 05/29/97 | 1000.00 |
| F. Full Name, Mailing Address and ZIP Code Citizens for Joe Kennedy 233 Needham Street, Ste 200 Newton, MA 02164 | Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 06/03/97 | 1000.00 |
| G. Full Name, Mailing Address and ZIP Code Baker for Congress P.O. Box 1694 Baton Rouge, LA 70821 | Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 06/03/97 | 1000.00 |
| H. Full Name, Mailing Address and ZIP Code Missourians for Kit Bond 507 Capitol Court, NE #100 Washington, DC 20002 | Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 06/13/97 | 2000.00 |
| I. Full Name, Mailing Address and ZIP Code Geghardt in Congress Committee 530 Seventh Street, SE Washington, DC 20003 | Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 06/16/97 | 500.00 |

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

Dickstein Shapiro Morin & Oshinsky, LLP PAC

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Boyd for Congress Committee P.O. Box 2284 Washington, DC 20013 | Rat-Off Debt Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) | 06/16/97 | 1000.00 |
| B. Full Name, Mailing Address and ZIP Code Friends of Chris Dodd 203 C Street, NE Washington, DC 20002 | Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 06/25/97 | 1000.00 |
| 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 |

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|--|----------|
| SUBTOTAL of Disbursements This Page (optional) | 2000.00 |
| TOTAL This Period (last page this line number only) | 22500.00 |

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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Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

JMU
PREPARER

7-31-97
DATE PREPARED