

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JAN 21 1 35 PM '98

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	2. FEC IDENTIFICATION NUMBER C00232629
CITY, STATE and ZIP CODE Washington, DC 20005	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (See FEC FORM LM)

4. TYPE OF REPORT

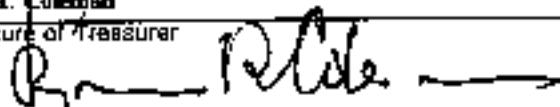
(a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

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
6. Covering Period <u>07/01/97</u> through <u>12/31/97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$ 45,470.82
(b) Cash on Hand at Beginning of Reporting Period.....	\$ 570.82	
(c) Total Receipts (from line 19).....	\$ 112,789.00	\$ 112,789.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	\$ 113,359.82	\$ 158,259.82
7. Total Disbursements (from Line 30).....	\$ 46,650.00	\$ 91,550.00
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))..	\$ 66,709.82	\$ 66,709.82
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	\$ 0.00	For further information: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9531 Local 202-219-3430
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	\$ 0.00	
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 Lynn E. Coleman		Date
Signature of Treasurer 		1-16-98

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

--	--	--	--	--	--	--	--	--

FEC FORM 3X

(Revised 8/93)

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised (1/1/91)

NAME OF COMMITTEE Skadden Arps Political Action Committee	REPORT COVERING PERIOD	
	FROM: 07/01/97	TO: 12/31/97
	COLUMN A	COLUMN B
	Total This Period	Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
I. Itemized (Use Schedule A).....	101,348.50	101,348.50
II. Unitemized.....	11,440.50	11,440.50
III. Total.....(add i and ii)>	112,789.00	112,789.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	0.00	0.00
d. Total Contributions.....(add aiii,b and c)>	112,789.00	112,789.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity.....	0.00	0.00
19. Total Receipts.....(add 11d,12,13,14,15,16,17,and 18)>	112,789.00	112,789.00
20. Total Federal Receipts.....(subtract line 18 from line 19)>	112,789.00	112,789.00
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share.....	0.00	0.00
ii. Non-Federal Share.....	0.00	0.00
b. Other Federal Operating Expenditures.....	400.00	800.00
c. Total Operating Expenditures.....(Add a,all, and b)>	400.00	800.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	46,250.00	90,750.00
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C.441a(d)) Use Schedule F.....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees.....	0.00	0.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (Such As PACs).....	0.00	0.00
d. Total Contribution Refunds.....(Add a,b, and c)>	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements.....(Add 21c,22,23,24,25,26,27,28d, and 29)>	46,650.00	91,550.00
31. Total Federal Disbursements.....(Subtract line 21 aii from line 30)>	46,650.00	91,550.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans)(from line 11d).....	112,789.00	112,789.00
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (Other than loans)(subtract line 33 from 32).....	112,789.00	112,789.00
35. Total Federal Operating Expenditures.....(add 21 ai and 21 b)>	400.00	800.00
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures.....(subtract line 36 from 35)>	400.00	800.00

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Roger Aaron 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 600.00
	Occupation Attorney	Aggregate Year-to-date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Sheldon Adler 300 So. Grand Avenue Los Angeles, CA 90007-1	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Stuart Alperin 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Rand S. April 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Peter Atkins 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 600.00
	Occupation Attorney	Aggregate Year-to-date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Kenneth Berlin 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Kenneth J. Blalkin 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 600.00
	Occupation Attorney	Aggregate Year-to-date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....> **2,842.50**

TOTAL this Period (Last page this line number only).....>

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Sheila L. Birnbaum 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 600.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 600.00		
B. Full Name, Mailing Address and Zip Code Katherine M. Bristol 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 237.50		
C. Full Name, Mailing Address and Zip Code Richard L. Brusca 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 237.50		
D. Full Name, Mailing Address and Zip Code Bruce M. Buck One Canada Square, Canary Wharf London, EG	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 300.00		
E. Full Name, Mailing Address and Zip Code John Wm. Butler 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 300.00		
F. Full Name, Mailing Address and Zip Code Ronald J. Clapham 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 215.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 215.00		
G. Full Name, Mailing Address and Zip Code Anthony W. Clark One Rodney Square Wilmington, DE 19899	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 237.50		

SUB TOTAL of Receipts This Page (Optional).....>	2,127.50
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	OF
	3	52
FOR LINE NUMBER		11 a i

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Kent A. Coit One Beacon Street Boston, MA 02108	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Lynn R. Coleman 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 400.00
	Occupation Attorney	Aggregate Year-to-date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Michael L. Cook 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Antoinette Cook Bush 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 500.00
	Occupation Attorney	Aggregate Year-to-date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Edward M. Crane 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Jeffrey H. Dastee 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 215.00
	Occupation Attorney	Aggregate Year-to-date > \$ 215.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Edmund C. Duffy 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional)..... > **2,125.00**

TOTAL this Period (Last page this line number only)..... >

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
Skadden Arps Political Action Committee

<p>A. Full Name, Mailing Address and Zip Code Martha Feltenstein 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 07/01/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 300.00</p>		
<p>B. Full Name, Mailing Address and Zip Code Joseph H. Flom 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 07/01/97</p>	<p>Amount of Each Receipt this Period 1,250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,250.00</p>		
<p>C. Full Name, Mailing Address and Zip Code Blaue Fogg 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 07/01/97</p>	<p>Amount of Each Receipt this Period 450.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 450.00</p>		
<p>D. Full Name, Mailing Address and Zip Code Patrick Foye 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 07/01/97</p>	<p>Amount of Each Receipt this Period 267.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 267.50</p>		
<p>E. Full Name, Mailing Address and Zip Code William P. Frank 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 07/01/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 500.00</p>		
<p>F. Full Name, Mailing Address and Zip Code David J. Friedman 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 07/01/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 300.00</p>		
<p>G. Full Name, Mailing Address and Zip Code Harry H. Garfinkel 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 07/01/97</p>	<p>Amount of Each Receipt this Period 219.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 219.00</p>		

SUB TOTAL of Receipts This Page (Optional)..... > **3,286.50**

TOTAL this Period (Last page this line number only)..... >

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Michael V. Gisser 30/F Peregrine Tower 89 Queensway Central, HK	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Franklin M. Glittes 30/F. Peregrine Tower 89 Queensway Central, HK	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 400.00
	Occupation Attorney	Aggregate Year-to-date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Jeffrey Glekel 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Janet L. Goetz 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 215.00
	Occupation Attorney	Aggregate Year-to-date > \$ 215.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Fred T. Goldberg Jr. 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 400.00
	Occupation Attorney	Aggregate Year-to-date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Shepard Goldfein 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Edward E. Gonzales 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional) > **2,120.00**

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	OF
	6	52
FOR LINE NUMBER		11 a i

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Thomas A. Hale 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Joseph W. Halliday 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 450.00
	Occupation Attorney	Aggregate Year-to-date > \$ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Stephen W. Hamilton 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Michael E. Hatchard One Canada Square London E14 5DS, EN	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Barry E. Hawk 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code F. Eugene Higel 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 215.00
	Occupation Attorney	Aggregate Year-to-date > \$ 215.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Thomas C. Janson 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....>	1,945.00
TOTAL this Period (Last page this line number only).....>	

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

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Samuel Kadet 919 Third Avenue New York, NY 10022		Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
B. Full Name, Mailing Address and Zip Code Richard R. Kalikow 919 Third Avenue New York, NY 10022		Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
C. Full Name, Mailing Address and Zip Code Jay B. Kusner 919 Third Avenue New York, NY 10022		Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
D. Full Name, Mailing Address and Zip Code Christopher J. Kell 919 Third Avenue New York, NY 10022		Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
E. Full Name, Mailing Address and Zip Code Phyllis G. Korff 919 Third Avenue New York, NY 10022		Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
F. Full Name, Mailing Address and Zip Code Jonathan Lee Koslow 919 Third Avenue New York, NY 10022		Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
G. Full Name, Mailing Address and Zip Code Theodore J. Kozloff Four Embarcadero Center San Francisco, CA 94111		Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 215.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Attorney	Aggregate Year-to-date > \$ 215.00	
SUB TOTAL of Receipts This Page (Optional)>				1,765.00
TOTAL this Period (Last page this line number only)>				

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Morris J. Kramer 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 500.00
	Occupation Attorney	Aggregate Year-to-date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Alan Kregel 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code William R. Kunkel 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Warren G. Lavey 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Andre Le Duc 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Nancy Lieberman 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 350.00
	Occupation Attorney	Aggregate Year-to-date > \$ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Bertil PH Lundqvist 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....> **2,192.50**

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	OF
	9	52
FOR LINE NUMBER		11 a i

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code James E. Lyons Four Embarcadero Center San Francisco, CA 94111	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code John Mangan 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Brian J. McCarthy 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Martha E. McGarry 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code J. Gregory Milmo 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 350.00
	Occupation Attorney	Aggregate Year-to-date > \$ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Harold F. Moore 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Charles M. Morgan 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....>	2,055.00
TOTAL this Period (Last page this line number only).....>	

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Charles W. Mulaney 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 500.00
	Occupation Attorney	Aggregate Year-to-date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Alan C. Myers 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 350.00
	Occupation Attorney	Aggregate Year-to-date > \$ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Clifford M. Naeve 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code John Nannes 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Benjamin F. Needell 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 500.00
	Occupation Attorney	Aggregate Year-to-date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Timothy A. Nelson 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Paul W. Oosterhuis 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional) > **2,485.00**

TOTAL this Period (Last page this line number only) >

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code William C. Pelster 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Robert B. Pincus One Rodney Square Wilmington, DE 19899	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Vincent J. Pisano 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Kenneth A. Plevin 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code John C. Quale 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Douglas Robinson 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Michael P. Rogan 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....>	1,785.00
TOTAL this Period (Last page this line number only).....>	

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Frank Rothman 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 550.00		
B. Full Name, Mailing Address and Zip Code Steven J. Rothschild One Rodney Square Wilmington, DE 19899	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 300.00		
C. Full Name, Mailing Address and Zip Code William S. Robenstein 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 300.00		
D. Full Name, Mailing Address and Zip Code Nicholas P. Saggese 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 350.00		
E. Full Name, Mailing Address and Zip Code J. Michael Schell 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 500.00		
F. Full Name, Mailing Address and Zip Code Marco E. Schnabl 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 215.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 215.00		
G. Full Name, Mailing Address and Zip Code Paul T. Schnell 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 300.00		

SUB TOTAL of Receipts This Page (Optional)> **2,515.00**

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

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Seth M. Schwartz 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Isaac Shapiro 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 402.50
	Occupation Attorney	Aggregate Year-to-date > \$ 402.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Robert C. Sheehan 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 450.00
	Occupation Attorney	Aggregate Year-to-date > \$ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Scott V. Simpson One Canada Square Longdon E14 SDS, EN	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Mark C. Smith 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code David E. Springer 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 215.00
	Occupation 	Aggregate Year-to-date > \$ 215.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Neal R. Stoll 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
SUB TOTAL of Receipts This Page (Optional).....>			2,142.50
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	OF
	14	52
FOR LINE NUMBER		
1181		

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Daniel E. Stoller 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Christina M. Teben 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 215.00
	Occupation Attorney	Aggregate Year-to-date > \$ 215.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Albert H. Turkus 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Harvey R. Uris 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 350.00
	Occupation Attorney	Aggregate Year-to-date > \$ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Enid L. Veron 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 215.00
	Occupation Attorney	Aggregate Year-to-date > \$ 215.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Rodman Ward One Rodney Square Wilmington, DE 19899	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Eric S. Waxman 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....>	1,852.50
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 OF
15 52
FOR LINE NUMBER
11 of 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)
Skadden Arps Political Action Committee

<p>A. Full Name, Mailing Address and Zip Code Michael L. Welner 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 07/01/97</p>	<p>Amount of Each Receipt this Period 237.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 237.50</p>		
<p>B. Full Name, Mailing Address and Zip Code Edward P. Welch One Rodney Square Wilmington, DE 19899</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 07/01/97</p>	<p>Amount of Each Receipt this Period 237.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 237.50</p>		
<p>C. Full Name, Mailing Address and Zip Code Marian P. Wexler 333 West Wacker Drive Chicago, IL 60606</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 07/01/97</p>	<p>Amount of Each Receipt this Period 237.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 237.50</p>		
<p>D. Full Name, Mailing Address and Zip Code Wayne W. Whalen 333 West Wacker Drive Chicago, IL 60606</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 07/01/97</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 400.00</p>		
<p>E. Full Name, Mailing Address and Zip Code Fred B. White 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 07/01/97</p>	<p>Amount of Each Receipt this Period 350.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 350.00</p>		
<p>F. Full Name, Mailing Address and Zip Code Edward J. Yodowitz 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 07/01/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 300.00</p>		
<p>G. Full Name, Mailing Address and Zip Code Robert E. Zimet 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 07/01/97</p>	<p>Amount of Each Receipt this Period 350.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 350.00</p>		

SUB TOTAL of Receipts This Page (Optional).....> **2,112.50**

TOTAL this Period (Last page this line number only).....>

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Randall H. Doud 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 07/01/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 300.00		
B. Full Name, Mailing Address and Zip Code Roger Aaron 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 1,200.00		
C. Full Name, Mailing Address and Zip Code Douglas B. Adler 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 237.50		
D. Full Name, Mailing Address and Zip Code Sheldon Adler 300 So. Grand Avenue Los Angeles, CA 90007-1	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
E. Full Name, Mailing Address and Zip Code Jose Allen Four Embarcadero Center San Francisco, CA 94111	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 237.50		
F. Full Name, Mailing Address and Zip Code Thomas J. Aillingham One Rodney Square Wilmington, DE 19899	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 237.50		
G. Full Name, Mailing Address and Zip Code Stuart Alperin 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 535.00		

SUB TOTAL of Receipts This Page (Optional)>	2,117.50
TOTAL this Period (Last page this line number only)>	

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Rand S. April 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Stephen Arcano 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 150.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Clifford H. Aronson 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Peter Atkins 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 600.00
	Occupation Attorney	Aggregate Year-to-date > \$ 1,200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Christopher L. Baker 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 197.50
	Occupation Attorney	Aggregate Year-to-date > \$ 395.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Stephen M. Banker 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Curtis K. Barnette 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 165.00
	Occupation Attorney	Aggregate Year-to-date > \$ 330.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....>	1,980.00
TOTAL this Period (Last page this line number only).....>	

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)
Skadden Arps Political Action Committee

<p>A. Full Name, Mailing Address and Zip Code Ronald C. Barusch 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 237.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 237.50</p>		
<p>B. Full Name, Mailing Address and Zip Code Thomas R. Bateman One Beacon Street Boston, MA 02108</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 215.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 215.00</p>		
<p>C. Full Name, Mailing Address and Zip Code Kenneth Berlin 1440 New York Avenue, NW Washington, DC 20005</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 237.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 475.00</p>		
<p>D. Full Name, Mailing Address and Zip Code Kenneth J. Bialkin 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 600.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,200.00</p>		
<p>E. Full Name, Mailing Address and Zip Code Jay L. Birnbaum 1440 New York Avenue, NW Washington, DC 20005</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 165.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 330.00</p>		
<p>F. Full Name, Mailing Address and Zip Code Sheila L. Birnbaum 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 600.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,200.00</p>		
<p>G. Full Name, Mailing Address and Zip Code Katherine M. Bristol 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 237.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 475.00</p>		
<p>SUB TOTAL of Receipts This Page (Optional).....></p>			<p>2,292.50</p>
<p>TOTAL this Period (Last page this line number only).....></p>			

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
Skadden Arps Political Action Committee

<p>A. Full Name, Mailing Address and Zip Code Margaret A. Brown One Beacon Street Boston, MA 02108</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 197.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 395.00</p>		
<p>B. Full Name, Mailing Address and Zip Code Richard L. Brusca 1440 New York Avenue, NW Washington, DC 20005</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 237.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 475.00</p>		
<p>C. Full Name, Mailing Address and Zip Code Bruce M. Buck One Canada Square, Canary Wharf London, EG</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 600.00</p>		
<p>D. Full Name, Mailing Address and Zip Code John Wm. Butler 333 West Wacker Drive Chicago, IL 60606</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 600.00</p>		
<p>E. Full Name, Mailing Address and Zip Code Patricia M. Chuff One Rodney Square Wilmington, DE 19899</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 360.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 360.00</p>		
<p>F. Full Name, Mailing Address and Zip Code Ronald J. Clapham 333 West Wacker Drive Chicago, IL 60606</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 215.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 430.00</p>		
<p>G. Full Name, Mailing Address and Zip Code Anthony W. Clark One Rodney Square Wilmington, DE 19899</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 237.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 475.00</p>		

SUB TOTAL of Receipts This Page (Optional).....> **1,847.50**

TOTAL this Period (Last page this line number only).....>

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)
Skadden Arps Political Action Committee

<p>A. Full Name, Mailing Address and Zip Code Jermine L. Cohen 300 South Grand Avenue Los Angeles, CA 90071</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 350.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 350.00</p>		
<p>B. Full Name, Mailing Address and Zip Code Eric L. Cochran 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 180.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 360.00</p>		
<p>C. Full Name, Mailing Address and Zip Code Jeffrey H. Cohen 300 So. Grand Avenue Los Angeles, CA 90071</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 300.00</p>		
<p>D. Full Name, Mailing Address and Zip Code Kent A. Coit One Beacon Street Boston, MA 02108</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 237.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 475.00</p>		
<p>E. Full Name, Mailing Address and Zip Code Lynn R. Coleman 1440 New York Avenue, NW Washington, DC 20005</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 800.00</p>		
<p>F. Full Name, Mailing Address and Zip Code Michael L. Cook 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 267.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 535.00</p>		
<p>G. Full Name, Mailing Address and Zip Code Antoinette Cook Bush 1440 New York Avenue, NW Washington, DC 20005</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		

SUB TOTAL of Receipts This Page (Optional).....> **2,085.00**

TOTAL this Period (Last page this line number only).....>

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Edward M. Crane 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
B. Full Name, Mailing Address and Zip Code Gary P. Cullen 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 197.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 395.00		
C. Full Name, Mailing Address and Zip Code Jeffrey H. Dasteel 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 215.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 430.00		
D. Full Name, Mailing Address and Zip Code Thomas A. Decapo One Beacon St. Boston, MA 02108	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 300.00		
E. Full Name, Mailing Address and Zip Code Robert J. Del Tufo 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 267.50		
F. Full Name, Mailing Address and Zip Code John A. Donovan 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 450.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 450.00		
G. Full Name, Mailing Address and Zip Code Randall H. Dond 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 600.00		

SUB TOTAL of Receipts This Page (Optional)>	1,817.50
TOTAL this Period (Last page this line number only)>	

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Edmund C. Duffy 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 535.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Howard L. Elin 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 125.00
	Occupation Attorney	Aggregate Year-to-date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Mitchell Ettinger 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 180.00
	Occupation Attorney	Aggregate Year-to-date > \$ 360.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Andrew M. Faulkner 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 180.00
	Occupation Attorney	Aggregate Year-to-date > \$ 360.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Martha Feltenstein 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Joseph H. Flom 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 1,250.00
	Occupation Attorney	Aggregate Year-to-date > \$ 2,500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Blaine Fogg 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 450.00
	Occupation Attorney	Aggregate Year-to-date > \$ 900.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....> **2,752.50**

TOTAL this Period (Last page this line number only).....>

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code William P. Frank 919 Third Avenue New York, NY 10022		Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	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	Aggregate Year-to-date > 8 1,000.00	
B. Full Name, Mailing Address and Zip Code Louis S. Freeman 333 West Wacker Drive Chicago, IL 60606		Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 178.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Attorney	Aggregate Year-to-date > 9 356.00	
C. Full Name, Mailing Address and Zip Code Dana H. Freyer 919 Third Avenue New York, NY 10022		Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Attorney	Aggregate Year-to-date > 9 360.00	
D. Full Name, Mailing Address and Zip Code David J. Friedman 919 Third Avenue New York, NY 10022		Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Attorney	Aggregate Year-to-date > 4 600.00	
E. Full Name, Mailing Address and Zip Code Barry H. Garfinkel 919 Third Avenue New York, NY 10022		Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 219.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Attorney	Aggregate Year-to-date > 8 438.00	
F. Full Name, Mailing Address and Zip Code Michael V. Gisser 30/F Peregrine Tower 89 Queensway Central, HK		Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Attorney	Aggregate Year-to-date > 8 535.00	
G. Full Name, Mailing Address and Zip Code Franklin M. Gittes 30/F. Peregrine Tower 89 Queensway Central, HK		Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Attorney	Aggregate Year-to-date > 4 800.00	
SUB TOTAL of Receipts This Page (Optional)>				2,044.50
TOTAL this Period (Last page this line number only)>				

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 contributors from such committee.

NAME OF COMMITTEE (In full)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Joseph J. Giunta 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 267.50		
B. Full Name, Mailing Address and Zip Code Michael E. Gizang 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 300.00		
C. Full Name, Mailing Address and Zip Code Jeffrey Glekel 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
D. Full Name, Mailing Address and Zip Code Janet L. Goetz 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 215.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 430.00		
E. Full Name, Mailing Address and Zip Code Jay M. Goffman 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 215.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 215.00		
F. Full Name, Mailing Address and Zip Code Fred T. Goldberg Jr. 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 800.00		
G. Full Name, Mailing Address and Zip Code Shepard Goldfein 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 600.00		

SUB TOTAL of Receipts This Page (Optional) **1,935.00**

TOTAL this Period (Last page this line number only)

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)
 Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Leslie J. Goldman 1440 New York Avenue, NW Washington, DC 20005		Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 350.00		
B. Full Name, Mailing Address and Zip Code David J. Goldschmidt 919 Third Avenue New York, NY 10022		Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 125.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 250.00		
C. Full Name, Mailing Address and Zip Code Edward E. Gonzales 919 Third Avenue New York, NY 10022		Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 600.00		
D. Full Name, Mailing Address and Zip Code Thomas R. Graham 1440 New York Avenue, NW Washington, DC 20005		Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 360.00		
E. Full Name, Mailing Address and Zip Code Peter E. Greene 919 Third Avenue New York, NY 10022		Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 267.50		
F. Full Name, Mailing Address and Zip Code Clifford R. Gross 1440 New York Avenue, NW Washington, DC 20005		Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 125.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 250.00		
G. Full Name, Mailing Address and Zip Code Kenneth A. Gross 1440 New York Avenue, NW Washington, DC 20005		Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 360.00		
SUB TOTAL of Receipts This Page (Optional).....>				1,527.50
TOTAL this Period (Last page this line number only).....>				

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Jonathan H. Grunzweig 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 125.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 250.00		
B. Full Name, Mailing Address and Zip Code Rodrigo A. Guerra 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 267.50		
C. Full Name, Mailing Address and Zip Code Thomas A. Hale 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
D. Full Name, Mailing Address and Zip Code Joseph W. Halliday 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 450.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 900.00		
E. Full Name, Mailing Address and Zip Code Stephen W. Hamilton 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
F. Full Name, Mailing Address and Zip Code Philip H. Harris 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 197.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 395.00		
G. Full Name, Mailing Address and Zip Code Michael E. Hatchard One Canada Square London E14 5DS, EN	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		

SUB TOTAL of Receipts This Page (Optional) > **1,752.50**

TOTAL this Period (Last page this line number only) >

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Harry E. Hawk 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 535.00		
B. Full Name, Mailing Address and Zip Code Linda Hayman 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 192.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 385.00		
C. Full Name, Mailing Address and Zip Code Sally McDonald Henry 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 197.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 395.00		
D. Full Name, Mailing Address and Zip Code Darrel J. Hleber 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 237.50		
E. Full Name, Mailing Address and Zip Code F. Eugene Hiegel 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 215.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 430.00		
F. Full Name, Mailing Address and Zip Code Seth E. Jacobson 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 250.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 250.00		
G. Full Name, Mailing Address and Zip Code Thomas C. Janson 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 600.00		

SUB TOTAL of Receipts This Page (Optional).....>	1,660.00
TOTAL this Period (Last page this line number only).....>	

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Samuel Kadet 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 475.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Richard R. Kalikow 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 475.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Stacy J. Kanter 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 197.50
	Occupation Attorney	Aggregate Year-to-date > \$ 395.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Joy B. Kasner 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Christopher J. Kell 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 475.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Andrew S. Kenoc 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 140.00
	Occupation Attorney	Aggregate Year-to-date > \$ 280.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Martin Klepper 1440 New York Avenue, NW Washington, DC 10005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 400.00
	Occupation Attorney	Aggregate Year-to-date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....> **1,750.00**

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	OF
	29	52
FOR LINE NUMBER		11 a i

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Phyllis G. Korff 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 600.00		
B. Full Name, Mailing Address and Zip Code Jonathan Lee Koslow 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
C. Full Name, Mailing Address and Zip Code Theodore J. Kozloff Four Embarcadero Center San Francisco, CA 94111	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 215.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 430.00		
D. Full Name, Mailing Address and Zip Code Keith D. Krakaur 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 125.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 250.00		
E. Full Name, Mailing Address and Zip Code Morris J. Kramer 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 500.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 1,000.00		
F. Full Name, Mailing Address and Zip Code Alan Kriegl 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
G. Full Name, Mailing Address and Zip Code Peter C. Krupp 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 180.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 360.00		

SUB TOTAL of Receipts This Page (Optional).....>	1,795.00
TOTAL this Period (Last page this line number only).....>	

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code William R. Kunkel 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 535.00		
B. Full Name, Mailing Address and Zip Code Warren G. Lavey 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
C. Full Name, Mailing Address and Zip Code Michael A. Lawson 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 165.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 330.00		
D. Full Name, Mailing Address and Zip Code Andre Le Duc 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 600.00		
E. Full Name, Mailing Address and Zip Code Neil M. Leff 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 180.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 360.00		
F. Full Name, Mailing Address and Zip Code Nancy Lieberman 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 350.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 700.00		
G. Full Name, Mailing Address and Zip Code Robert E. Lighthizer 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 400.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 400.00		

SUB TOTAL of Receipts This Page (Optional)>	1,900.00
TOTAL this Period (Last page this line number only)>	

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
Skadden Arps Political Action Committee

<p>A. Full Name, Mailing Address and Zip Code Bertil PH Lundqvist 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 600.00</p>	
<p>B. Full Name, Mailing Address and Zip Code James E. Lyons Four Embarcadero Center San Francisco, CA 94111</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 267.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 535.00</p>	
<p>C. Full Name, Mailing Address and Zip Code John Mungan 1440 New York Avenue, NW Washington, DC 20005</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 600.00</p>	
<p>D. Full Name, Mailing Address and Zip Code Brian J. McCarthy 300 South Grand Avenue Los Angeles, CA 90071</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 600.00</p>	
<p>E. Full Name, Mailing Address and Zip Code Neal S. McCoy 1440 New York Avenue, NW Washington, DC 20005</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 267.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 267.50</p>	
<p>F. Full Name, Mailing Address and Zip Code Martha E. McGarry 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 237.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 475.00</p>	
<p>G. Full Name, Mailing Address and Zip Code Peter J. McKenna 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/01/97</p>	<p>Amount of Each Receipt this Period 350.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 350.00</p>	

SUB TOTAL of Receipts This Page (Optional)..... > **2,021.50**

TOTAL this Period (Last page this line number only)..... >

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code J. Gregory Milmo 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 350.00
	Occupation Attorney	Aggregate Year-to-date > \$ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Harold F. Moore 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Charles M. Morgan 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Charles W. Mulaney 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 500.00
	Occupation Attorney	Aggregate Year-to-date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Peter Mullen 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 187.50
	Occupation Attorney	Aggregate Year-to-date > \$ 375.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Allan G. Mutchnik 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 150.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Alan C. Myers 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 350.00
	Occupation Attorney	Aggregate Year-to-date > \$ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional)..... > **2,137.50**

TOTAL this Period (Last page this line number only)..... >

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Clifford M. Naeve 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code John Nannes 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 535.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Peter J. Necklen 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 197.50
	Occupation Attorney	Aggregate Year-to-date > \$ 395.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Benjamin F. Needell 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 500.00
	Occupation Attorney	Aggregate Year-to-date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Timothy A. Nelson 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 535.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Gregg A. Noel 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Douglas E. Nordlinger 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....> **2,067.50**

TOTAL this Period (Last page this line number only).....>

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Pamela F. Olson 1440 New York Avenue, NW Washington, DC 20005	Skadden, Arps	08/01/97	215.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$	215.00
Paul W. Oosterhuis 1440 New York Avenue, NW Washington, DC 20005	Skadden, Arps	08/01/97	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$	600.00
John W. Osborn 919 Third Avenue New York, NY 10022	Skadden, Arps	08/01/97	237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$	237.50
William C. Pelster 919 Third Avenue New York, NY 10022	Skadden, Arps	08/01/97	237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$	475.00
Robert B. Pincus One Rodney Square Wilmington, DE 19899	Skadden, Arps	08/01/97	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$	600.00
Vincent J. Pisano 919 Third Avenue New York, NY 10022	Skadden, Arps	08/01/97	237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$	475.00
Kenneth A. Pleven 919 Third Avenue New York, NY 10022	Skadden, Arps	08/01/97	267.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$	535.00

SUB TOTAL of Receipts This Page (Optional).....>	1,795.00
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 **35** OF **52**
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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Ann H. Pollock 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 475.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
B. Full Name, Mailing Address and Zip Code John C. Quale 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
C. Full Name, Mailing Address and Zip Code John D. Rayls 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 237.50		
D. Full Name, Mailing Address and Zip Code Douglas Robinson 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
E. Full Name, Mailing Address and Zip Code Nell L. Rock 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 300.00		
F. Full Name, Mailing Address and Zip Code Michael P. Rogan 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 535.00		
G. Full Name, Mailing Address and Zip Code Matthew A. Rosen 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 400.00		

SUB TOTAL of Receipts This Page (Optional) **2,005.00**

TOTAL this Period (Last page this line number only)

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Frank Rothman 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 550.00
	Occupation Attorney	Aggregate Year-to-date > \$ 1,100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Steven J. Rothschild One Rodney Square Wilmington, DE 19899	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code William S. Rubenstein 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Nicholas P. Saggese 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 350.00
	Occupation Attorney	Aggregate Year-to-date > \$ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code J. Michael Schell 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 500.00
	Occupation Attorney	Aggregate Year-to-date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Marco E. Schnabl 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 215.00
	Occupation Attorney	Aggregate Year-to-date > \$ 430.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Paul T. Schuell 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....> **2,515.00**

TOTAL this Period (Last page this line number only).....>

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Seth M. Schwartz 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 475.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Wallace L. Schwartz 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Isaac Shapiro 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 402.50
	Occupation Attorney	Aggregate Year-to-date > \$ 805.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Robert C. Sheehan 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 450.00
	Occupation Attorney	Aggregate Year-to-date > \$ 900.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Eileen Nugent Simon 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Scott V. Simpson One Canada Square Longdon E14 SDS, EN	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Peter Simshauser 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 197.50
	Occupation Attorney	Aggregate Year-to-date > \$ 395.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....>	2,187.50
TOTAL this Period (Last page this line number only).....>	

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Charles F. Smith 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 150.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 300.00		
B. Full Name, Mailing Address and Zip Code Mark C. Smith 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
C. Full Name, Mailing Address and Zip Code Mitchell J. Solomon 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 267.50		
D. Full Name, Mailing Address and Zip Code David E. Springer 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 215.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 430.00		
E. Full Name, Mailing Address and Zip Code Mary Lou Steptoe 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 197.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 395.00		
F. Full Name, Mailing Address and Zip Code Neal R. Stoll 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 600.00		
G. Full Name, Mailing Address and Zip Code Daniel E. Stoller 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 600.00		

SUB TOTAL of Receipts This Page (Optional)> **1,667.50**

TOTAL this Period (Last page this line number only).....>

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Irene A. Sullivan 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Robert J. Sullivan 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code William J. Sweet 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Lyndon C. Taylor 1600 Smith Street, Ste. 4460 Houston, TX 77002	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 197.50
	Occupation Attorney	Aggregate Year-to-date > \$ 395.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Christina M. Tchen 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 215.00
	Occupation Attorney	Aggregate Year-to-date > \$ 430.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Marc B. Tucker One Rodney Square Wilmington, DE 19899	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 197.50
	Occupation Attorney	Aggregate Year-to-date > \$ 395.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Albert H. Turkus 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 535.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional) > **1,712.50**

TOTAL this Period (Last page this line number only) >

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Harvey R. Uris 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 350.00
	Occupation Attorney	Aggregate Year-to-date > \$ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Jeffrey Boyd Valle 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Rald L. Veron 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 215.00
	Occupation Attorney	Aggregate Year-to-date > \$ 430.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Raymond W. Vickers 30/F Peregrine Tower, Lippo Ce Central Hong Kong, HK	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 267.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Robert C. Vincent 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 165.00
	Occupation Attorney	Aggregate Year-to-date > \$ 330.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Garrett J. Waltzer 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 125.00
	Occupation Attorney	Aggregate Year-to-date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Erica A. Ward 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 175.00
	Occupation Attorney	Aggregate Year-to-date > \$ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....> **1,535.00**

TOTAL this Period (Last page this line number only).....>

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
 Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Rodman Ward One Rodney Square Wilmington, DE 19899	Skadden, Arps Occupation Attorney	08/01/97	267.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 535.00		
Eric S. Waxman 300 South Grand Avenue Los Angeles, CA 90071	Skadden, Arps Occupation Attorney	08/01/97	237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
Thomas Weil Jr. 1600 Smith Street Houston, TX 77002	Skadden, Arps Occupation Attorney	08/01/97	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 300.00		
Michale L. Weiner 919 Third Avenue New York, NY 10022	Skadden, Arps Occupation Attorney	08/01/97	237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
Edward P. Welch One Rodney Squart Wilmington, DE 19899	Skadden, Arps Occupation Attorney	08/01/97	237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
Marian P. Wexler 333 West Wacker Drive Chicago, IL 60606	Skadden, Arps Occupation Attorney	08/01/97	237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
Wayne W. Whalen 333 West Wacker Drive Chicago, IL 60606	Skadden, Arps Occupation Attorney	08/01/97	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 800.00		

SUB TOTAL of Receipts This Page (Optional).....	1,767.50
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	OF
	42	52
FOR LINE NUMBER		
1181		

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)
Stadler Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Fred B. White 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 350.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 700.00		
B. Full Name, Mailing Address and Zip Code Vaughn C. Williams 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 180.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 360.00		
C. Full Name, Mailing Address and Zip Code Michael A. Woronoff 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 197.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 395.00		
D. Full Name, Mailing Address and Zip Code Edward J. Yockowitz 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 600.00		
E. Full Name, Mailing Address and Zip Code Robert E. Zimet 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 350.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 700.00		
F. Full Name, Mailing Address and Zip Code George A. Zimmerman 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 267.50		
G. Full Name, Mailing Address and Zip Code Patrick Foye 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/01/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 535.00		

SUB TOTAL of Receipts This Page (Optional).....>	1,912.50
TOTAL this Period (Last page this line number only).....>	

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Douglas B. Adler 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
B. Full Name, Mailing Address and Zip Code Jose Allen Four Embarcadero Center San Francisco, CA 94111	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
C. Full Name, Mailing Address and Zip Code Thomas J. Allingham One Rodney Square Wilmington, DE 19899	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		
D. Full Name, Mailing Address and Zip Code James V. Alpi 1440 New York Avenue NW Washington, DC 20005	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 165.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 330.00		
E. Full Name, Mailing Address and Zip Code Clifford H. Aronsan 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 267.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 535.00		
F. Full Name, Mailing Address and Zip Code Stephen M. Banker 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 600.00		
G. Full Name, Mailing Address and Zip Code Ronald C. Barsuch 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Occupation Attorney	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 237.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		

SUB TOTAL of Receipts This Page (Optional)..... > **1,682.50**

TOTAL time Period (Last page this line number only)..... >

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Thomas R. Bateman One Beacon Street Boston, MA 02108	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 215.00
	Occupation Attorney	Aggregate Year-to-date > \$ 430.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Jeffrey S. Christie Suntec City Tower 2,9 Temase Singapore, SI 0718	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 165.00
	Occupation Attorney	Aggregate Year-to-date > \$ 330.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Jerome L. Cohen 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 350.00
	Occupation Attorney	Aggregate Year-to-date > \$ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Karen L. Curman 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 150.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Robert J. Del Tufo 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 535.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code John A. Donovan 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 450.00
	Occupation Attorney	Aggregate Year-to-date > \$ 900.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Brian W. Duwe 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 150.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....>	1,747.50
TOTAL this Period (Last page this line number only).....>	

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)
Skadden Arps Political Action Committee

<p>A. Full Name, Mailing Address and Zip Code John Estes III 1440 New York Avenue, NW Washington, DC 20005</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 125.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 250.00</p>		
<p>B. Full Name, Mailing Address and Zip Code Stuart M. Finkelstein 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 197.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 395.00</p>		
<p>C. Full Name, Mailing Address and Zip Code Richard S. Fortunado 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 197.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 395.00</p>		
<p>D. Full Name, Mailing Address and Zip Code Hilary S. Foulkes 60308 Frankfurt am MAIN Frankfurt, GE</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 165.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 330.00</p>		
<p>E. Full Name, Mailing Address and Zip Code Lawrence D. Frishman 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 125.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 250.00</p>		
<p>F. Full Name, Mailing Address and Zip Code Angela G. Garcia 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 125.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 250.00</p>		
<p>G. Full Name, Mailing Address and Zip Code John L. Gardiner 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 165.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 330.00</p>		

SUB TOTAL of Receipts This Page (Optional).....> **1,100.00**

TOTAL this Period (Last page this line number only).....>

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Joseph J. Giunta 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 535.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Michael E. Gizang 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 300.00
	Occupation Attorney	Aggregate Year-to-date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Jay M. Goffman 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 215.00
	Occupation Attorney	Aggregate Year-to-date > \$ 430.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Leslie J. Goldman 1440 New York Avenue, NW Washington, DC 10005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 350.00
	Occupation Attorney	Aggregate Year-to-date > \$ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Peter E. Greene 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 535.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Rodrigo A. Guerra 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney	Aggregate Year-to-date > \$ 535.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Darrel J. Fleher 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 475.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....> **1,905.00**

TOTAL this Period (Last page this line number only).....>

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Robert C. Hinkley 52 Martin Place Sydney, New S. Wales, AU	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 180.00
	Occupation Attorney	Aggregate Year-to-date > \$ 360.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code James A. Keyte 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 165.00
	Occupation Attorney	Aggregate Year-to-date > \$ 330.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Kenton J. King Four Embarcadero Center San Francisco, CA 94111	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 150.00
	Occupation Attorney	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Martin Klepper 1440 New York Avenue, NW Washington, DC 10005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 400.00
	Occupation Attorney	Aggregate Year-to-date > \$ 800.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Robert E. Lighthizer 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 400.00
	Occupation Attorney	Aggregate Year-to-date > \$ 800.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Clifford W. Lush 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney	Aggregate Year-to-date > \$ 237.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Jeanine L. Matte 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 197.50
	Occupation Attorney	Aggregate Year-to-date > \$ 395.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....> **1,730.00**

TOTAL this Period (Last page this line number only).....>

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):
Skadden Arps Political Action Committee

<p>A. Full Name, Mailing Address and Zip Code Neal S. McCoy 1440 New York Avenue, NW Washington, DC 20005</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 267.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 535.00</p>	
<p>B. Full Name, Mailing Address and Zip Code Peter J. McKenna 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 350.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 700.00</p>	
<p>C. Full Name, Mailing Address and Zip Code John E. Mendez 300 South Grand Avenue Los Angeles, CA 90071</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 197.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 395.00</p>	
<p>D. Full Name, Mailing Address and Zip Code Gregg A. Noel 300 South Grand Avenue Los Angeles, CA 90071</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 267.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 535.00</p>	
<p>E. Full Name, Mailing Address and Zip Code Douglas E. Nurdlinger 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 267.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 535.00</p>	
<p>F. Full Name, Mailing Address and Zip Code Pamela F. Olson 1440 New York Avenue, NW Washington, DC 20005</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 215.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 430.00</p>	
<p>G. Full Name, Mailing Address and Zip Code John W. Osborn 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 237.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 475.00</p>	

SUB TOTAL of Receipts This Page (Optional).....> **1,802.50**

TOTAL this Period (Last page this line number only).....>

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In full)
Skadden Arps Political Action Committee

<p>A. Full Name, Mailing Address and Zip Code Jonathan F. Pedersen 89 Queensway Central Hong Kong, HK</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 197.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 395.00</p>		
<p>B. Full Name, Mailing Address and Zip Code John D. Rayls 300 So. Grand Avenue Los Angeles, CA 90071</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 237.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 475.00</p>		
<p>C. Full Name, Mailing Address and Zip Code Matthew A. Rosen 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 800.00</p>		
<p>D. Full Name, Mailing Address and Zip Code Andrew L. Sandler 1440 New York Avenue, NW Washington, DC 20005</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 165.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 330.00</p>		
<p>E. Full Name, Mailing Address and Zip Code Rodd M. Schreiber 333 West Wacker Drive Chicago, IL 60606</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 125.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 250.00</p>		
<p>F. Full Name, Mailing Address and Zip Code Wallace L. Schwartz 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 600.00</p>		
<p>G. Full Name, Mailing Address and Zip Code Eileen Nugent Simon 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 600.00</p>		
<p>SUB TOTAL of Receipts This Page (Optional).....></p>			<p>1,725.00</p>
<p>TOTAL this Period (Last page this line number only).....></p>			<p></p>

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)
Skadden Arps Political Action Committee

<p>A. Full Name, Mailing Address and Zip Code Mitchell J. Solomon 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 267.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 535.00</p>		
<p>B. Full Name, Mailing Address and Zip Code Irene A. Sullivan 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 600.00</p>		
<p>C. Full Name, Mailing Address and Zip Code Robert J. Sullivan 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 267.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 535.00</p>		
<p>D. Full Name, Mailing Address and Zip Code Susan J. Sutherland 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 300.00</p>		
<p>E. Full Name, Mailing Address and Zip Code William J. Sweet 1440 New York Avenue, NW Washington, DC 20005</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 267.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 535.00</p>		
<p>F. Full Name, Mailing Address and Zip Code Karen L. Valhara One Rodney Square Wilmington, DE 19899</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 125.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 250.00</p>		
<p>G. Full Name, Mailing Address and Zip Code Jeffrey Boyd Valle 300 So. Grand Avenue Los Angeles, CA 90071</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 08/29/97</p>	<p>Amount of Each Receipt this Period 237.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 475.00</p>		
<p>SUB TOTAL of Receipts This Page (Optional).....></p>			<p>1,615.00</p>
<p>TOTAL this Period (Last page this line number only).....></p>			

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

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code Raymond W. Vickers 30/F Peregrine Tower, Lipa Ct Central Hong Kong, HK	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 535.00		
B. Full Name, Mailing Address and Zip Code Rainer K. Wachter 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 125.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 250.00		
C. Full Name, Mailing Address and Zip Code George A. Zimmerman 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 267.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 535.00		
D. Full Name, Mailing Address and Zip Code James E. Ivester 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 08/29/97	Amount of Each Receipt this Period 150.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 300.00		
E. Full Name, Mailing Address and Zip Code Earl Yaffa 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 09/15/97	Amount of Each Receipt this Period 600.00
	Occupation Managing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 600.00		
F. Full Name, Mailing Address and Zip Code Marcia R. Nirenstein 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 10/01/97	Amount of Each Receipt this Period 155.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 310.00		
G. Full Name, Mailing Address and Zip Code Clifford W. Losh 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 10/01/97	Amount of Each Receipt this Period 237.50
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 475.00		

SUB TOTAL of Receipts This Page (Optional).....> **1,802.50**

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

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In full)
Skadden Arps Political Action Committee

<p>A. Full Name, Mailing Address and Zip Code Maxwell M. Miller 333 West Wacker Drive Chicago, IL 60606</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 10/01/97</p>	<p>Amount of Each Receipt this Period 125.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 250.00</p>		
<p>B. Full Name, Mailing Address and Zip Code Sarah M. Ward 919 Third Street New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 10/01/97</p>	<p>Amount of Each Receipt this Period 180.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 360.00</p>		
<p>C. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>D. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>E. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>F. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>G. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>SUB TOTAL of Receipts This Page (Optional) ></p>			<p>305.00</p>
<p>TOTAL this Period (Last page this line number only) ></p>			<p>101,348.50</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Skadden, Arps 1440 New York Avenue, N.W. Washington, DC 20005	Administrative Expenses Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	11/07/97	400.00
B. 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 Disb. this Period
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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional)..... >	400.00
TOTAL this Period (Last page this line number only)..... >	400.00

SCHEDULE B ITEMIZED DISBURSEMENTS

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 or any political committee to solicit contributions from such committees.

NAME OF COMMITTEE (In Full)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Friends of Barbara Boxer 426 C Street, NE Washington, DC 20002	Barbara Boxer, U.S. SENATE CA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/15/97	1,500.00
National Republican Senatorial Committee 97 425 Second St., NE Washington, DC 20002	Contribution to Party Committee Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997	07/15/97	5,000.00
DSCC 1997 430 So. Capitol St, SE Washington, D.C., DC 20002	Contribution to Party Committee Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997	07/15/97	5,000.00
NRCC-97 320 First St., SE Washington, DC 20003	Contribution to Party Committee Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997	07/15/97	5,000.00
DCCC 1997 430 South Capitol St. NE Washington, DC 20003	Contribution to Party Committee Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997	07/15/97	5,000.00
Republican Majority Fund PO Box 19897 Alexandria, VA 22320	Contribution to Committee Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997	07/16/97	1,000.00
Friends of Harry Reid 116 Princeton Las Vegas, NV 89107	Harry Reid, U.S. SENATE NV Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/16/97	1,000.00
Evan Bayh Committee 10 West Market Street Indianapolis, IN 46204	Evan Bayh, U.S. SENATE IN Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/21/97	1,000.00
Houghton for Congress PO Box 1107 Corning, NY 14830	Ann Houghton, U.S. HOUSE 31st NY Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/97	500.00

SUB TOTAL of Disbursements this page (Optional).....> 25,000.00

TOTAL this Period (Last page this line number only).....>

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	2	4
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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
 Sladden Arpa Political Action Committee

A. Full Name, Mailing Address and Zip Code Clyburn for Congress Committee PO Box 75654 Washington, DC 20013	Purpose of Disbursement James E. Clyburn, U.S. HOUSE 6th SC	Date (Month day, Year) 09/18/97	Amount of Each Disb. this Period 500.00
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998		
B. Full Name, Mailing Address and Zip Code Shelby for Senate PO Box 1091 Tuscaloosa, AL 35403	Purpose of Disbursement Richard C. Shelby, U.S. SENATE AL	Date (Month day, Year) 09/18/97	Amount of Each Disb. this Period 1,000.00
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998		
C. Full Name, Mailing Address and Zip Code Friends of Senator Nickles PO Box 1549 Ponca City, OK 74602	Purpose of Disbursement Don Nickles, U.S. SENATE OK	Date (Month day, Year) 09/18/97	Amount of Each Disb. this Period 1,000.00
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998		
D. Full Name, Mailing Address and Zip Code Friends of Conrad Burns PO Box 1532 Billings, MT 59103	Purpose of Disbursement Conrad Burns, U.S. SENATE MT	Date (Month day, Year) 09/23/97	Amount of Each Disb. this Period 1,000.00
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 2000		
E. Full Name, Mailing Address and Zip Code Murtha for Congress Committee PO Box 1091 Johnstown, PA 15907	Purpose of Disbursement John P. Murtha, U.S. HOUSE 12th PA	Date (Month day, Year) 09/23/97	Amount of Each Disb. this Period 1,000.00
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998		
F. Full Name, Mailing Address and Zip Code Levin for Congress Committee 421 New Jersey Avenue, SE Washington, DC 20003	Purpose of Disbursement Sander M. Levin, U.S. HOUSE 12th MI	Date (Month day, Year) 10/07/97	Amount of Each Disb. this Period 500.00
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998		
G. Full Name, Mailing Address and Zip Code Ehlers for Congress 4451 Brookfield Corp. Dr. Ste. 200 Chantilly, VA 20151	Purpose of Disbursement Vernon J. Ehlers, U.S. HOUSE 3rd MI	Date (Month day, Year) 10/07/97	Amount of Each Disb. this Period 500.00
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998		
H. Full Name, Mailing Address and Zip Code Missourians for Kit Bond 507 Capitol Court, NE, #100 Washington, DC 20002	Purpose of Disbursement Christopher S. Bond, U.S. SENATE MO	Date (Month day, Year) 10/21/97	Amount of Each Disb. this Period 1,000.00
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998		
I. Full Name, Mailing Address and Zip Code Missourians for Kit Bond 507 Capitol Court, NE, #100 Washington, DC 20002	Purpose of Disbursement Stop Payment Lost Check	Date (Month day, Year) 10/21/97	Amount of Each Disb. this Period -1,000.00
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998		

SUB TOTAL of Disbursements this page (Optional).....> 5,500.00

TOTAL this Period (Last page this line number only).....>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE	OF
3	4
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)
Shadden Arps Political Action Committee

<p>A. Full Name, Mailing Address and Zip Code Coverdell Good Govt. Committee 1010 Wisconsin Avenue, NW Washington, DC 20007</p>	<p>Purpose of Disbursement Paul Coverdell, U.S. SENATE GA</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 10/23/97</p>	<p>Amount of Each Disb. this Period 1,000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Campbell Victory Fund 236 Massachusetts Ave. NE Washington, DC 20002</p>	<p>Purpose of Disbursement Ben Nighthorse Campbell, U.S. SENATE CO</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 10/22/97</p>	<p>Amount of Each Disb. this Period 1,000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Evan Bayh Committee 10 West Market Street Indianapolis, IN 46204</p>	<p>Purpose of Disbursement Evan Bayh, U.S. SENATE IN</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 10/24/97</p>	<p>Amount of Each Disb. this Period 1,000.00</p>
<p>D. Full Name, Mailing Address and Zip Code National Republican Senatorial Committee 97 425 Second St., NE Washington, DC 20002</p>	<p>Purpose of Disbursement Senate Majority Dinner</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997</p>	<p>Date (Month day, Year) 10/28/97</p>	<p>Amount of Each Disb. this Period 3,000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Martin Frost Campaign Committee PO Box 75214 Washington, DC 20013</p>	<p>Purpose of Disbursement Martin Frost, U.S. HOUSE 24th TX</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 10/28/97</p>	<p>Amount of Each Disb. this Period 500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Brownback for US Senate PO Box 2008 Topeka, KS 66601</p>	<p>Purpose of Disbursement Sam Brownback, U.S. SENATE KS</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 10/31/97</p>	<p>Amount of Each Disb. this Period 1,000.00</p>
<p>G. Full Name, Mailing Address and Zip Code California/Nevada Victory Fund 607 14th St., NW, Ste. 880 Washington, DC 20005</p>	<p>Purpose of Disbursement Contribution to Federal PAC</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997</p>	<p>Date (Month day, Year) 11/05/97</p>	<p>Amount of Each Disb. this Period 2,000.00</p>
<p>H. Full Name, Mailing Address and Zip Code A Lot of People Supporting Tom Daschle PO Box 1656 Sioux Falls, SD 57101</p>	<p>Purpose of Disbursement Tom Daschle, U.S. SENATE SD</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 11/05/97</p>	<p>Amount of Each Disb. this Period 1,000.00</p>
<p>I. Full Name, Mailing Address and Zip Code Ben Cardin for Congress 38 Ivy Street, SE Washington, DC 20003</p>	<p>Purpose of Disbursement Benjamin L. Cardin, U.S. HOUSE 3rd MD</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 11/05/97</p>	<p>Amount of Each Disb. this Period 500.00</p>

SUB TOTAL of Disbursements this page (Optional)..... > **11,000.00**

TOTAL this Period (Last page this line number only)..... >

SCHEDULE B ITEMIZED DISBURSEMENTS

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Stevens for Senate PO Box 1766 Washington, DC 20013	Ted Stevens, U.S. SENATE AK Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 2002	11/13/97	250.00
B. Full Name, Mailing Address and Zip Code Rangel for Congress Committee 850 Seventh Avenue New York, NY 10019	Stop Payment Last Check Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	11/17/97	-1,000.00
C. Full Name, Mailing Address and Zip Code Tom Campbell for Congress 1116 Foothill Street Redwood City, CA 94061	Stop Payment Last Check Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	11/17/97	-500.00
D. Full Name, Mailing Address and Zip Code DCCC 1997 430 South Capitol St. NE Washington, DC 20003	Contribution to Party Committee (DCCC) Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997	12/04/97	3,500.00
E. Full Name, Mailing Address and Zip Code Carol Moseley-Braun for US Senate 1900 W. Place, NE Washington, DC 20018	Carol Moseley-Braun, U.S. SENATE IL Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/12/97	500.00
F. Full Name, Mailing Address and Zip Code Congressman Bart Gordon Committee PO Box 2008 Murfreesboro, TN 37133	Bart Gordon, U.S. HOUSE 6th TN Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/15/97	1,000.00
G. Full Name, Mailing Address and Zip Code Daggett for U.S. Congress Committee PO Box 5843 Austin, TX 78763	Lloyd Daggett, U.S. HOUSE 10th TX Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/18/97	1,000.00
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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional).....>	4,750.00
TOTAL this Period (Last page this line number only).....>	46,250.00

SCHEDULE A

**ITEMIZED RECEIPTS
EXEMPT LEGAL SERVICES**

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)
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Beth K. Fricke 1440 New York Avenue, NW Washington, DC 20005	Skadden, Arps Occupation Political Reports Analyst	12/31/97	2,600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 2,860.00		(Memo Entry)
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Deborah B. Testerman 1440 New York Avenue, NW Washington, DC 20005	Skadden, Arps Occupation Legislative Assistant	12/31/97	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 100.00		(Memo Entry)
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Kenneth A. Gross 1440 New York Avenue, NW Washington, DC 20005	Skadden, Arps Occupation Attorney	12/31/97	380.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 380.00		(Memo Entry)
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)	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)	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)	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)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional).....>

TOTAL this Period (Last page this line number only).....>

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.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 1/21/98
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 E.S.	 1/21/98
PREPARER	DATE PREPARED