

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

Oct 15 12 45 PM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Dickstein, Shapiro & Morin, L.L.P., PAC

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

CITY, STATE and ZIP CODE
Washington, DC 20037

2. FEC IDENTIFICATION NUMBER
C0011097

3. This committee has qualified as a public finance committee. (see FEC FORM 1M)

4. TYPE OF REPORT

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

- Monthly Report Due On:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

Twelfth day report preceding _____ (Type of Election)

election on _____ in the State of _____

Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A	COLUMN B
5. Covering Period <u>07/01/96</u> through <u>09/30/96</u>		This Period	Calendar Year-to-Date
6. (a) Cash on Hand January 1, 19 <u>96</u>			\$ 15577.38
(b) Cash on Hand at Beginning of Reporting Period		\$ (2581.35)	
(c) Total Receipts (from line 19)		\$ 17283.95	\$ 24627.66
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 14702.60	\$ 40205.04
7. Total Disbursements (from Line 30)		\$ 15000.00	\$ 40349.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ (297.40)	\$ (143.96)
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20483 Toll Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		\$	

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
Douglas M. Chapin, Jr. - Assistant Treasurer

Signature of Treasurer
Douglas M. Chapin, Jr.

Date
10/15/96

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

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
Dickstein, Shapiro & Morin, L.L.P., PAC		FROM: 09/30/96	To: 96
		COLUMN A	COLUMN B
		Total This Period	Calendar Year
I. Receipts			
11. Contributions (other than loans) from:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (see Schedule A)		17227.50	24524.40
ii. Unitemized			
iii. Total	(add i and ii) ▶	17227.50	24524.40
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions	(add a iii, b and c) ▶	17227.50	24524.40
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		56.45	103.26
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) ▶	17283.95	24627.66
20. Total Federal Receipts	(subtract line 18 from line 19) ▶	17283.95	24627.66
B. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			(1.00)
b. Other Federal Operating Expenditures			(1.00)
c. Total Operating Expenditures	(Add a i, a ii, and b) ▶		(1.00)
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		14500.00	39850.00
24. Independent Expenditures (see Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (see Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees		500.00	500.00
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds	(Add a, b and c) ▶	500.00	500.00
29. Other Disbursements			
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ▶	15000.00	40349.00
31. Total Federal Disbursements	(subtract line 21 a ii from line 30) ▶	15000.00	40349.00
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)		17227.50	24524.40
33. Total Contribution Refunds (from line 28d)		500.00	500.00
34. Net Contributions (other than loans) (subtract line 33 from 32)		16727.50	24024.40
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) ▶		(1.00)
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures	(subtract line 36 from 35) ▶		(1.00)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4
FOR LINE NUMBER 11a

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)

Dickstein, Shapiro & Morin, L.L.P., PAC FEC ID No. C0011097

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ken L. Adams 2808 34th Street, NW Washington, DC 20008	Dickstein, Shapiro Morin, LLP "DSMLLP"	7/19/96	100.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
Aggregate Year-To-Date > 1 371.90			
Lee A. Alexander 2101 L Street, NW Washington, DC 20037	DSMLLP	7/19/96	687.50
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
Aggregate Year-To-Date > 1			
Henry C. Cashen, II 5160 Palisade Lane, NW Washington, DC 20016	DSMLLP	7/19/96	500.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
Aggregate Year-To-Date > 1			
Howard N. Feldman 820 Stratford Manor Terrace Silver Spring, MD 20910	DSMLLP	7/19/96	337.50
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
Aggregate Year-To-Date > 1			
Lawrence Garr 2101 L Street, Nw Washington, DC 20037	DSMLLP	7/19/96	425.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
Aggregate Year-To-Date > 1			
G. Michael Green 2101 L Street, Nw Washington, DC 20037	DSMLLP	7/19/96	337.50
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
Aggregate Year-To-Date > 1			
Jon D. Grossman 2101 L Street, NW Washington, DC 20037	DSMLLP	7/19/96	162.50
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
Aggregate Year-To-Date > 1			

SUBTOTAL of Receipts This Page (optional)	2550.00
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 2 OF 4
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)

Dickstein, Shapiro & Morin, L.L.P., PAC FEC ID No. C0011097

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary M. Hoffman 5017 King David Blvd. Annandale, VA 22003	Dickstein, Shapiro Morin, LLP "DSMLLP"	7/19/96	750.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney Aggregate Year-To-Date > \$		
Jeffrey M. Johnson 2101 L Street, NW Washington, DC 20037	DSMLLP	7/19/96	775.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney Aggregate Year-To-Date > \$		
John T. Kotelly 2101 L Street, NW Washington, DC 20037	DSMLLP	7/19/96	950.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney Aggregate Year-To-Date > \$		
Arthur J. Lafave, III 2101 L Street, NW Washington, DC 20037	DSMLLP	7/19/96	525.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney Aggregate Year-To-Date > \$		
Neil Lefkowitz 2101 L Street, NW Washington, DC 20037	DSMLLP	7/19/96	175.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney Aggregate Year-To-Date > \$		
Patrick W. Lynch 2101 L Street, NW Washington, DC 20037	DSMLLP	7/19/96	75.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney Aggregate Year-To-Date > \$		
Peter W. Morgan 2101 L Street, NW Washington, DC 20037	DSMLLP	7/19/96	775.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney Aggregate Year-To-Date > \$		

SUBTOTAL of Receipts This Page (optional) 4025.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be used 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) **Dickstein, Shapiro & Morin, L.L.P., PAC** **FEC ID No. C0011097**

A. Full Name, Mailing Address and ZIP Code Michael E. Nannes 2101 L Street, NW Washington, DC 20037	Name of Employer Dickstein, Shapiro Morgan, LLP "DSMLLP"	Date (month, day, year) 7/19/96	Amount of Each Receipt this Period 775.00
	Occupation Attorney	Aggregate Year-To-Date > \$	
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code Charles W. Saber 2101 L Street, NW Washington, DC 20037	Name of Employer DSMLLP	Date (month, day, year) 7/19/96	Amount of Each Receipt this Period 512.50
	Occupation Attorney	Aggregate Year-To-Date > \$	
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code Michael E. Nannes 2101 L Street, NW Washington, DC 20037	Name of Employer DSMLLP	Date (month, day, year) 7/19/96	Amount of Each Receipt this Period 775.00
	Occupation Attorney	Aggregate Year-To-Date > \$	
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code Ken L. Adams 2808 34th Street, NW Washington, DC 20008	Name of Employer DSMLLP	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period 500.00
	Occupation Attorney	Aggregate Year-To-Date > \$	
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code George T. Boggs 2101 L Street, NW Washington, DC 20037	Name of Employer DSMLLP	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period 1040.00
	Occupation Attorney	Aggregate Year-To-Date > \$	
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code Henry C. Cashen, II 5160 Palisade Lane, NW Washington, DC 20016	Name of Employer DSMLLP	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period 887.50
	Occupation Attorney	Aggregate Year-To-Date > \$	
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code Gary M. Hoffman 5017 King David Blvd. Annandale, VA 22003	Name of Employer DSMLLP	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period 1337.50
	Occupation Attorney	Aggregate Year-To-Date > \$	
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	5827.50
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

Dickstein, Shapiro & Morin, L.L.P., PAC FEC ID No. C0011097

A. Full Name, Mailing Address and ZIP Code Neil Lefkowitz 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Dickstein, Shapiro Morin, LLP "DSMLLP" Occupation Attorney	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period 350.00
	Aggregate Year-To-Date > 4 525.00		
B. Full Name, Mailing Address and ZIP Code Dan M. Litt 5604 Bent Branch Road Bethesda, MD 20816 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMLLP Occupation Accounting	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period 1475.00
	Aggregate Year-To-Date > 3		
C. Full Name, Mailing Address and ZIP Code Ira H. Polon 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMLLP Occupation Attorney	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period 1650.00
	Aggregate Year-To-Date > 1		
D. Full Name, Mailing Address and ZIP Code Ken L. Adams 2808 34th Street, NW Washington, DC 20008 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMLLP Occupation Attorney	Date (month, day, year) 9/17/96	Amount of Each Receipt this Period 500.00
	Aggregate Year-To-Date > 4 1371.90		
E. Full Name, Mailing Address and ZIP Code Richard J. Leveridge 8627 Buckboard Drive Alexandria, VA 22308 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMLLP Occupation Attorney	Date (month, day, year) 9/17/96	Amount of Each Receipt this Period 425.00
	Aggregate Year-To-Date > 1		
F. Full Name, Mailing Address and ZIP Code Elaine Metlin 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMLLP Occupation Attorney	Date (month, day, year) 9/17/96	Amount of Each Receipt this Period 250.00
	Aggregate Year-To-Date > 1		
G. Full Name, Mailing Address and ZIP Code Paul Taskier 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMLLP Occupation Attorney	Date (month, day, year) 9/17/96	Amount of Each Receipt this Period 175.00
	Aggregate Year-To-Date > 3		

SUBTOTAL of Receipts This Page (optional)	4825.00
TOTAL This Period (last page this line number only)	17227.50

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (or Fund)

Dickstein, Shapiro & Morin, L.L.P., PAC

FEC ID No. C0011097

A. Full Name, Mailing Address and ZIP Code NationsBank 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Interest Earned On Money Market Account Occupation Aggregate Year-To-Date > 3	Date (month, day, year) 7/31/96	Amount of Each Receipt this Period 8.70
B. Full Name, Mailing Address and ZIP Code NationsBank 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Interest Earned On Money Market Account Occupation Aggregate Year-To-Date > 6	Date (month, day, year) 8/30/96	Amount of Each Receipt this Period 21.95
C. Full Name, Mailing Address and ZIP Code NationsBank 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date > 6	Date (month, day, year) 9/30/96	Amount of Each Receipt this Period 25.80
D. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date > 4	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date > 5	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date > 4	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date > 3	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 56.45

TOTAL This Period (last page this line number only) 56.45

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	2
FOR LINE NUMBER		
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NAME OF COMMITTEE (In Full)
 Dickstein, Shapiro & Morin, L.L.P., PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Volunteers for Vento P.O. Box 65254 ST. Paul, MN 55165	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/8/96	500.00
B. Full Name, Mailing Address and ZIP Code Citizens Committee for Ernest F. Hollings P.O. Box 65271 Washington, DC 20035	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/17/96	1000.00
C. Full Name, Mailing Address and ZIP Code Chabot for Congress 105 West Fourth Street Room 1133 Cincinnati, OH 45202	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96	500.00
D. Full Name, Mailing Address and ZIP Code Sheila Frahm for U.S. Senate 128 North Columbus Street Alexandria, VA 22314	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/24/96	1000.00
E. Full Name, Mailing Address and ZIP Code Friends of Mike Parker 1300 North 17th Street Suite 1847 Rosslyn, VA 22209	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/24/96	1000.00
F. Full Name, Mailing Address and ZIP Code Zimmer for Senate P.O. Box 6888 Laurenceville, NJ 08648	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/30/96	1000.00
G. Full Name, Mailing Address and ZIP Code Nevadans for "Spike" Wilson 6100 Elton Avenue, Ste. 1000 Las Vegas, NV 89107	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/30/96	1000.00
H. Full Name, Mailing Address and ZIP Code New Republican Majority Fund 228 S. Washington Street Suite 200 Alexandria, VA 22314	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/96	1000.00
I. Full Name, Mailing Address and ZIP Code Bill Sutton for Congress P.O. Box 10505 Jacksonville, FL 32206	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/3/96	1000.00

SUBTOTAL of Disbursements This Page (optional)	8000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Dickstein, Shapiro & Morin, L.L.P., PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Baker for Congress P.O. Box 1694 Baton Rouge, LA 70821	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/10/96	500.00
B. Full Name, Mailing Address and ZIP Code Neumann for Congress Committee 4010 Franconia Road Alexandria, VA 22310-2136	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/11/96	500.00
C. Full Name, Mailing Address and ZIP Code Congressman Bart Gordon Committee P.O. Box 2008 Murfreesboro, TN 37133	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/12/96	1000.00
D. Full Name, Mailing Address and ZIP Code Bob Wise for Congress P.O. 5536 Charleston, WV 25361	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/12/96	500.00
E. Full Name, Mailing Address and ZIP Code Missourians for Kit Bond c/o Steve Gordon 507 Capitol Court, NE #100 Washington, DC 20002	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/96	1000.00
F. Full Name, Mailing Address and ZIP Code Nethercutt for Congress P.O. Box 1925 Spokane, WA 99210	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/96	500.00
G. Full Name, Mailing Address and ZIP Code Hyde for Congress Committee 603 North Yoke Road Amherst, IL 60126	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/96	1000.00
H. Full Name, Mailing Address and ZIP Code Goode for Congress 112 North Main Street Rocky Mount, VA 24151	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/25/96	1000.00
I. Full Name, Mailing Address and ZIP Code Friends of David Weldon P.O. Box 968 Melbourne, FL 32902-0968	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/25/96	500.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

14500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 28a

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NAME OF COMMITTEE (In Full)

Dickstein, Shapiro & Morin, L.L.P., PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Lee A. Alexander 9325 Sprinklewood Lane Potomac, MD 20854		7/25/96	500.00
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 Disbursement 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 Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00

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