

SKADDEN, ARPS, SLATE, MEAGHER & FLOM RECEIVED
FEDERAL ELECTION

1440 NEW YORK AVENUE, N.W.

WASHINGTON, D.C. 20005-2111

(202) 371-7000

COMMISSION MAIL ROOM

JUL 25 3 43 PM '97

FAX (202) 393-6700

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(202) 371-7007
DIRECT FAX
(202) 371-7958

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July 25, 1997

HAND-DELIVERY

Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

Re: Skadden, Arps Political Action Com-
mittee

To whom it may concern:

Enclosed please find the following amended reports:

- October 15 Quarterly 1996 (Schedule A, Detailed Summary Page and Summary Page)
- 12-Day Pre 1996 (Detailed Summary Page and Summary Page)
- 30-Day Post 1996 (Detailed Summary Page and Summary Page)
- Year-End 1996 (Detailed Summary Page and Summary Page)

Please feel free to call me if you have any questions.

Sincerely,


Kenneth A. Gross

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 25 3 49 PM '97

1. NAME OF COMMITTEE (in full) Skadden Arps Political Action Committee		2. FEC IDENTIFICATION NUMBER C00232629
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1440 New York Avenue, NW		
CITY, STATE and ZIP CODE Washington, DC 20005		
		3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (See FEC FORM JM)

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>08/22/96</u> through <u>09/30/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 31,290.29
(b) Cash on Hand at Beginning of Reporting Period	\$ 69,738.32	
(c) Total Receipts (from line 19)	\$ 15,995.00	\$ 104,343.03
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 85,733.32	\$ 135,633.32
7. Total Disbursements (from Line 30)	\$ 13,800.00	\$ 63,700.00
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	\$ 71,933.32	\$ 71,933.32
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 800 424-9530 Local 202-219-3420
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 R. Coleman

Signature of Treasurer
Lynn R. Coleman by KAC

Date
7/25/97

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

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised (1/1/91)

NAME OF COMMITTEE Sladden Arms Political Action Committee	REPORT COVERING PERIOD	
	FROM: 08/22/96	TO: 09/30/96
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (Use Schedule A).....	15,995.00	104,132.50
ii. Unitemized.....	0.00	0.00
iii. Total.....(add i and ii) >	15,995.00	104,132.50
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	0.00	0.00
d. Total Contributions.....(add all, b and c) >	15,995.00	104,132.50
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	210.53
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) >	15,995.00	104,343.03
20. Total Federal Receipts.....(subtract line 16 from line 19) >	15,995.00	104,343.03
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.....	300.00	600.00
c. Total Operating Expenditures.....(Add ai, aii, and b) >	300.00	600.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13,500.00	63,100.00
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) >	13,800.00	63,700.00
31. Total Federal Disbursements.....(Subtract line 21 all from line 30) >	13,800.00	63,700.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans)(from line 11d).....	15,995.00	104,343.03
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (Other than loans)(subtract line 33 from 32).....	15,995.00	104,343.03
35. Total Federal Operating Expenditures.....(add 21 ai and 21 b) >	300.00	600.00
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures.....(subtract line 36 from 35) >	300.00	600.00

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

<p>A. Full Name, Mailing Address and Zip Code Sheldon Adler 300 So. Grand Avenue Los Angeles, CA 90007-1</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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>B. Full Name, Mailing Address and Zip Code Jose Allen Four Embarcadero Center San Francisco, CA 94111</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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 Thomas J. Allingham One Rodney Square Wilmington, DE 19899</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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 James V. Alpi 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) 09/03/96</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 Rand S. April 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) 09/03/96</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>F. Full Name, Mailing Address and Zip Code Clifford H. Aronson 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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 Stephen M. Axinn 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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>1,730.00</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 Thomas R. Batenian One Beacon Street Boston, MA 02108</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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>B. Full Name, Mailing Address and Zip Code David T. Brewster One Beacon Street Boston, MA 02108</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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>C. Full Name, Mailing Address and Zip Code Jeffrey S. Christie Suntec City Tower 2,9 Temasek Singapore, SI 0718</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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 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) 09/03/96</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>E. Full Name, Mailing Address and Zip Code Gary P. Cullen 333 West Wacker Drive Chicago, IL 60606</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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>F. Full Name, Mailing Address and Zip Code Susan M. Curtis 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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 Jeffrey H. Dasteel 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) 09/03/96</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>		

SUB TOTAL of Receipts This Page (Optional).....> **1,382.50**

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

SCHEDULE A ITEMIZED RECEIPTS

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

<p>A. Full Name, Mailing Address and Zip Code James M. Douglas 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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>B. Full Name, Mailing Address and Zip Code Brian W. Dowe 333 West Wacker Drive Chicago, IL 60606</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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>C. Full Name, Mailing Address and Zip Code Mitchell Ertlger 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) 09/03/96</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>D. 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) 09/03/96</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>E. 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) 09/03/96</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>F. Full Name, Mailing Address and Zip Code James C. Freund 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</p>	<p>Amount of Each Receipt this Period 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 > \$ 500.00</p>	
<p>G. Full Name, Mailing Address and Zip Code Barry 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) 09/03/96</p>	<p>Amount of Each Receipt this Period 255.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 510.00</p>	
<p>SUB TOTAL of Receipts This Page (Optional).....></p>			<p>1,362.50</p>
<p>TOTAL this Period (Last page this line number only).....></p>			<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 11
FOR LINE NUMBER 11 a i

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

<p>A. Full Name, Mailing Address and Zip Code Jay M. Goffman 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</p>	<p>Amount of Each Receipt this Period 140.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 280.00</p>	
<p>B. Full Name, Mailing Address and Zip Code Leslie J. Goldman 1440 New York Avenue, NW Washington, DC 10005</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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 Edward E. Gonzales 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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 Peter E. Green 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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 Sally McDonald Henry 919 Third Avenue New York, NY 10022</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</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>F. Full Name, Mailing Address and Zip Code Darrel J. Fleber 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) 09/03/96</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 N. Lynn Hiestand 333 West Wacker Drive Chicago, IL 60606</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p>	<p>Date (Month day, Year) 09/03/96</p>	<p>Amount of Each Receipt this Period 132.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 265.00</p>	
<p>SUB TOTAL of Receipts This Page (Optional).....></p>			<p>1,625.00</p>
<p>TOTAL this Period (Last page this line number only).....></p>			<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **5** OF **11**
FOR LINE NUMBER **11 a i**

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

A. 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) 09/03/96	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 Robert C. Hinkley 52 Martin Place Sydney, New S. Wales, AU	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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 James E. Ivester 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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)			
D. 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) 09/03/96	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)			
E. Full Name, Mailing Address and Zip Code Richard F. Kadlick 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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 James A. Keyte 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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 Martin Klepper 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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)			

SUB TOTAL of Receipts This Page (Optional).....> **1,560.00**

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

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FOR LINE NUMBER
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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 Lou R. Kling 919 Third Avenue New York, NY 10022</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-date > \$ 700.00</p>	<p>Date (Month day, Year) 09/03/96</p>	<p>Amount of Each Receipt this Period 350.00</p>
<p>B. Full Name, Mailing Address and Zip Code Jonathan Lee Koslow 919 Third Avenue New York, NY 10022</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-date > \$ 475.00</p>	<p>Date (Month day, Year) 09/03/96</p>	<p>Amount of Each Receipt this Period 237.50</p>
<p>C. Full Name, Mailing Address and Zip Code Peter C. Krupp 333 West Wacker Drive Chicago, IL 60606</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-date > \$ 330.00</p>	<p>Date (Month day, Year) 09/03/96</p>	<p>Amount of Each Receipt this Period 165.00</p>
<p>D. Full Name, Mailing Address and Zip Code Michael A. Lawson 300 So. Grand Avenue Los Angeles, CA 90071</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-date > \$ 300.00</p>	<p>Date (Month day, Year) 09/03/96</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p>E. Full Name, Mailing Address and Zip Code Jeffrey S. Lichtman 919 Third Avenue New York, NY 10022</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-date > \$ 330.00</p>	<p>Date (Month day, Year) 09/03/96</p>	<p>Amount of Each Receipt this Period 165.00</p>
<p>F. Full Name, Mailing Address and Zip Code Bertil PH Lundqvist 919 Third Avenue New York, NY 10022</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-date > \$ 600.00</p>	<p>Date (Month day, Year) 09/03/96</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>G. Full Name, Mailing Address and Zip Code Jeanine L. Matz 1440 New York Avenue, NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Skadden, Arps</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-date > \$ 395.00</p>	<p>Date (Month day, Year) 09/03/96</p>	<p>Amount of Each Receipt this Period 197.50</p>

SUB TOTAL of Receipts This Page (Optional).....> **1,565.00**

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

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
Martha E. McGarry 919 Third Avenue New York, NY 10022	Skadden, Arps	09/03/96	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	
Allan G. Mutchnik 300 So. Grand Avenue Los Angeles, CA 90071	Skadden, Arps	09/03/96	125.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$ 250.00	
Marcia R. Nirenstein 1446 New York Avenue, NW Washington, DC 20005	Skadden, Arps	09/03/96	140.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$ 280.00	
Jonathan F. Pedersen 89 Queensway Central Hong Kong, HK	Skadden, Arps	09/03/96	180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$ 360.00	
Ann H. Pollock 333 West Wacker Drive Chicago, IL 60606	Skadden, Arps	09/03/96	215.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$ 430.00	
Harriet S. Posner 300 So. Grand Avenue Los Angeles, CA 90071	Skadden, Arps	09/03/96	180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$ 360.00	
Alesia Ranney-Marinell 919 Third Avenue New York, NY 10022	Skadden, Arps	09/03/96	215.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$ 430.00	
SUB TOTAL of Receipts This Page (Optional).....>			1,292.50
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

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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 John D. Rayis 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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 Timothy G. Reynolds 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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)			
C. Full Name, Mailing Address and Zip Code Neil L. Rock 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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)			
D. Full Name, Mailing Address and Zip Code Andrew L. Sandler 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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 J. Michael Schell 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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 Isaac Shapiro 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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)			
G. Full Name, Mailing Address and Zip Code Peter Sinschauser 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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)			

SUB TOTAL of Receipts This Page (Optional).....> **1,627.50**

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 Mark C. Smith 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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 Neal R. Stoll 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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 Irene A. Sullivan 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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 Susan J. Sutherland 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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)			
E. 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) 09/03/96	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 Lyndon C. Taylor 1600 Smith Street, Ste. 4460 Houston, TX 77002	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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)			
G. Full Name, Mailing Address and Zip Code Sally A. Thurston 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 09/03/96	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).....>			1,542.50
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
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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
Marc B. Tucker One Rodney Square Wilmington, DE 19899	Skadden, Arps	09/03/96	180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$	360.00
Jeffrey Boyd Valle 300 So. Grand Avenue Los Angeles, CA 90071	Skadden, Arps	09/03/96	215.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$	430.00
Raymond W. Vickers 30/F Peregrine Tower, Lippo Ce Central Hong Kong, HK	Skadden, Arps	09/03/96	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
Fred B. White 919 Third Avenue New York, NY 10022	Skadden, Arps	09/03/96	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$	700.00
Michael A. Woronoff 300 So. Grand Avenue Los Angeles, CA 90071	Skadden, Arps	09/03/96	180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$	360.00
Seth M. Schwartz 919 Third Avenue New York, NY 10022	Skadden, Arps	09/03/96	215.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Attorney	Aggregate Year-to-date > \$	430.00
David Fox 919 Third Avenue New York, NY 10022	Skadden, Arps	09/03/96	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
SUB TOTAL of Receipts This Page (Optional).....>			1,707.50
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

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

A. Full Name, Mailing Address and Zip Code Earl Yoffa 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps	Date (Month day, Year) 09/12/96	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		
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
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
	Occupation		
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
	Occupation		
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
	Occupation		
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).....>	600.00
TOTAL this Period (Last page this line number only).....>	15,995.00

