

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

2000 OCT 20 P 2:00

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Skadden Arps Political Action Committee	2. FEC IDENTIFICATION NUMBER C00232628
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1440 New York Avenue, NW	3. <input checked="" type="checkbox"/> This committee has qualified as a multi-candidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Washington, DC 20005	

## 4. TYPE OF REPORT

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

Monthly Report Due On:

- February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     January 31

- Twelfth day report preceding \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?     YES     NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>09/01/00</u> through <u>09/30/00</u>		
6. (a) Cash on Hand January 1, <u>2000</u>		\$ 152,410.82
(b) Cash on Hand at Beginning of Reporting Period	\$ 94,510.82	
(c) Total Receipts (from Line 19)	\$ 73,783.00	\$ 73,783.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 168,293.82	\$ 226,193.82
7. Total Disbursements (from Line 30)	\$ 4,500.00	\$ 62,400.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 163,793.82	\$ 163,793.82
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

For further information contact  
Federal Election Commission  
909 E Street, NW  
Washington, DC 20543  
Toll Free 800-424-9600  
Local 202-694-1400

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*

Date

10/20/2000

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

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**FEC FORM 3X**

(revised 9/93)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: Skadden Arps Political Action Committee		REPORT COVERING PERIOD	
		FROM	TO
		09/01/00	09/30/00
		COLUMN A	COLUMN B
		Total This Period	Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		72,367.00	72,367.00 11(a)(i)
ii. Unitemized		1,416.00	1,416.00 11(a)(ii)
Total	(add i and ii) >	73,783.00	73,783.00 11(a)(iii)
b. Political Party Committees		0.00	0.00 11(b)
c. Other Political Committees (such as PACs)		0.00	0.00 11(c)
d. Total Contributions	(add a iii, b and c) >	73,783.00	73,783.00 11(d)
12. Transfers From Affiliated/Other Party Committees		0.00	0.00 12
13. All Loans Received		0.00	0.00 13
14. Loan Repayments Received		0.00	0.00 14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		0.00	0.00 15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		0.00	0.00 16
17. Other Federal Receipts (Dividends, Interest, etc.)		0.00	0.00 17
18. Transfers from Nonfederal Account for Joint Activity		0.00	0.00 18
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	73,783.00	73,783.00 19
20. Total Federal Receipts	(subtract line 18 from line 19) >	73,783.00	73,783.00 20
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share		0.00	0.00 21(a)(i)
ii. Non-Federal Share		0.00	0.00 21(a)(ii)
b. Other Federal Operating Expenditures		0.00	400.00 21(b)
c. Total Operating Expenditures	(add a i, a ii, and b) >	0.00	400.00 21(c)
22. Transfers to Affiliated/Other Party Committees		0.00	0.00 22
23. Contributions to Federal Candidates/Committees and Other Political Committees		4,500.00	62,000.00 23
24. Independent Expenditures (use Schedule E)		0.00	0.00 24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		0.00	0.00 25
26. Loan Repayments Made		0.00	0.00 26
27. Loans Made		0.00	0.00 27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees		0.00	0.00 28(a)
b. Political Party Committees		0.00	0.00 28(b)
c. Other Political Committees (such as PACs)		0.00	0.00 28(c)
d. Total Contribution Refunds	(add a, b and c) >	0.00	0.00 28(d)
29. Other Disbursements		0.00	0.00 29
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	4,500.00	62,400.00 30
31. Total Federal Disbursements	(subtract line 21 a i from line 30) >	4,500.00	62,400.00 31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)		73,783.00	73,783.00 32
33. Total Contribution Refunds (from line 28d)		0.00	0.00 33
34. Net Contributions (other than loans) (subtract line 33 from 32)		73,783.00	73,783.00 34
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >	0.00	400.00 35
36. Offsets to Operating Expenditures (from line 15)		0.00	0.00 36
37. Net Operating Expenditures	(subtract line 36 from 35) >	0.00	400.00 37

**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 Roger Aaron 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date \$ 900.00	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  900.00
B. Full Name, Mailing Address and ZIP Code Blaine Fogg 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date \$ 675.00	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  675.00
C. Full Name, Mailing Address and ZIP Code William Frank 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date \$ 750.00	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  750.00
D. Full Name, Mailing Address and ZIP Code Steven Rothschild One Rodney Square Wilmington, DE 19899  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date \$ 450.00	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  450.00
E. Full Name, Mailing Address and ZIP Code David Friedman 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date \$ 525.00	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  525.00
F. Full Name, Mailing Address and ZIP Code Jonathan Lee Koslow 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date \$ 356.00	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  356.00
G. Full Name, Mailing Address and ZIP Code Michael Gizang 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date \$ 450.00	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  450.00

**SUBTOTAL** of Receipts This Page (optional) ..... **4,106.00**

**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 **26**

FOR LINE NUMBER **11 a 1**

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

<b>A. Full Name, Mailing Address and ZIP Code</b> <b>Gary Cullen</b> <b>333 West Wacker Drive</b> <b>Chicago, IL 60606</b>	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt This Period <b>450.00</b>
	Occupation <b>Attorney</b>	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$ <b>450.00</b>			
<b>B. Full Name, Mailing Address and ZIP Code</b> <b>Edward Gonzalez</b> <b>919 Third Avenue</b> <b>New York, NY 10022</b>	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt This Period <b>450.00</b>
	Occupation <b>Attorney</b>	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$ <b>450.00</b>			
<b>C. Full Name, Mailing Address and ZIP Code</b> <b>Franklin Gittes</b> <b>30/F. Paregrine Tower</b> <b>89 Queensway Central, HK</b>	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt This Period <b>600.00</b>
	Occupation <b>Attorney</b>	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$ <b>600.00</b>			
<b>D. Full Name, Mailing Address and ZIP Code</b> <b>Joseph Glunza</b> <b>300 South Grand Avenue</b> <b>Los Angeles, CA 90071</b>	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt This Period <b>401.00</b>
	Occupation <b>Attorney</b>	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$ <b>401.00</b>			
<b>E. Full Name, Mailing Address and ZIP Code</b> <b>Jeffrey Mishkin</b> <b>4 Times Square</b> <b>New York, NY 10036</b>	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt This Period <b>401.00</b>
	Occupation <b>Partner</b>	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$ <b>401.00</b>			
<b>F. Full Name, Mailing Address and ZIP Code</b> <b>Peter Greene</b> <b>919 Third Avenue</b> <b>New York, NY 10022</b>	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt This Period <b>401.00</b>
	Occupation <b>Attorney</b>	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$ <b>401.00</b>			
<b>G. Full Name, Mailing Address and ZIP Code</b> <b>Rodrigo Guerra</b> <b>300 South Grand Avenue</b> <b>Los Angeles, CA 90071</b>	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt This Period <b>450.00</b>
	Occupation <b>Attorney</b>	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$ <b>450.00</b>			

SUBTOTAL of Receipts This Page (optional) .....

**3,153.00**

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 **3** OF **26**

FOR LINE NUMBER **11-81**

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**NAME OF COMMITTEE (in Full)**  
Skadden Arps Political Action Committee

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Bertil P-H 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><b>Name of Employer</b> Skadden, Arps</p> <p><b>Occupation</b> Attorney</p> <p>Aggregate Year-to-Date &gt; \$ <b>450.00</b></p>	<p><b>Date (month, day, year)</b> 09/29/00</p>	<p><b>Amount of Each Receipt this Period</b> 450.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Lawrence Frishman 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><b>Name of Employer</b> Skadden, Arps</p> <p><b>Occupation</b> Attorney</p> <p>Aggregate Year-to-Date &gt; \$ <b>270.00</b></p>	<p><b>Date (month, day, year)</b> 09/29/00</p>	<p><b>Amount of Each Receipt this Period</b> 270.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> Samuel Kadet 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><b>Name of Employer</b> Skadden, Arps</p> <p><b>Occupation</b> Attorney</p> <p>Aggregate Year-to-Date &gt; \$ <b>401.00</b></p>	<p><b>Date (month, day, year)</b> 09/29/00</p>	<p><b>Amount of Each Receipt this Period</b> 401.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> J. Phillip Adams 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><b>Name of Employer</b> Skadden, Arps</p> <p><b>Occupation</b> Attorney</p> <p>Aggregate Year-to-Date &gt; \$ <b>358.00</b></p>	<p><b>Date (month, day, year)</b> 09/29/00</p>	<p><b>Amount of Each Receipt this Period</b> 358.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> William Kunkel 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><b>Name of Employer</b> Skadden, Arps</p> <p><b>Occupation</b> Attorney</p> <p>Aggregate Year-to-Date &gt; \$ <b>450.00</b></p>	<p><b>Date (month, day, year)</b> 09/29/00</p>	<p><b>Amount of Each Receipt this Period</b> 450.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Christopher Kell 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><b>Name of Employer</b> Skadden, Arps</p> <p><b>Occupation</b> Attorney</p> <p>Aggregate Year-to-Date &gt; \$ <b>401.00</b></p>	<p><b>Date (month, day, year)</b> 09/29/00</p>	<p><b>Amount of Each Receipt this Period</b> 401.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Jonathan Foot Pedersen 89 Queensway Central Hong Kong, HK</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Name of Employer</b> Skadden, Arps</p> <p><b>Occupation</b> Attorney</p> <p>Aggregate Year-to-Date &gt; \$ <b>358.00</b></p>	<p><b>Date (month, day, year)</b> 09/29/00</p>	<p><b>Amount of Each Receipt this Period</b> 358.00</p>

**SUBTOTAL of Receipts This Page (optional)**

**2,684.00**

**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 4 OF 28

FOR LINE NUMBER 1131

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

<b>A. Full Name, Mailing Address and ZIP Code</b> <b>Jay Kasner</b> 919 Third Avenue New York, NY 10022	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt this Period <b>525.00</b>
	Occupation <b>Attorney</b>	Aggregate Year-to-Date \$ <b>525.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>B. Full Name, Mailing Address and ZIP Code</b> <b>Lou Kling</b> 919 Third Avenue New York, NY 10022	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt this Period <b>800.00</b>
	Occupation <b>Attorney</b>	Aggregate Year-to-Date \$ <b>800.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>C. Full Name, Mailing Address and ZIP Code</b> <b>Douglas Adler</b> 919 Third Avenue New York, NY 10022	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt this Period <b>356.00</b>
	Occupation <b>Attorney</b>	Aggregate Year-to-Date \$ <b>356.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>D. Full Name, Mailing Address and ZIP Code</b> <b>Theodore Kozloff</b> Four Embarcadero Center San Francisco, CA 94111	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt this Period <b>296.00</b>
	Occupation <b>Attorney</b>	Aggregate Year-to-Date \$ <b>296.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>E. Full Name, Mailing Address and ZIP Code</b> <b>Morris Kramer</b> 919 Third Avenue New York, NY 10022	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt this Period <b>750.00</b>
	Occupation <b>Attorney</b>	Aggregate Year-to-Date \$ <b>750.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>F. Full Name, Mailing Address and ZIP Code</b> <b>Sheldon Adler</b> 300 So. Grand Avenue Los Angeles, CA 90007-1	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt this Period <b>401.00</b>
	Occupation <b>Attorney</b>	Aggregate Year-to-Date \$ <b>401.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>G. Full Name, Mailing Address and ZIP Code</b> <b>Michael Lawson</b> 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt this Period <b>323.00</b>
	Occupation <b>Attorney</b>	Aggregate Year-to-Date \$ <b>323.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

**SUBTOTAL** of Receipts This Page (optional) .....

**3,251.00**

**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**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<b>John Quale</b> 1440 New York Avenue, NW Washington, DC 20005	<b>Skadden, Arps</b>	<b>09/29/00</b>	<b>356.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ <b>356.00</b>	
<b>Sarah Ward</b> 919 Third Street New York, NY 10022	<b>Skadden, Arps</b>	<b>09/29/00</b>	<b>356.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ <b>356.00</b>	
<b>Mark Bronson</b> ATT Main Tower 12F Tokyo, ---	<b>Skadden, Arps</b>	<b>09/29/00</b>	<b>225.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>	Aggregate Year-to-Date > \$ <b>225.00</b>	
<b>James Lyons</b> Four Embarcadero Center San Francisco, CA 94111	<b>Skadden, Arps</b>	<b>09/29/00</b>	<b>450.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ <b>450.00</b>	
<b>Martha Mc Garry</b> 919 Third Avenue New York, NY 10022	<b>Skadden, Arps</b>	<b>09/29/00</b>	<b>401.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ <b>401.00</b>	
<b>Alison Schnairov</b> 919 Third Avenue New York, NY 10022	<b>Skadden, Arps</b>	<b>09/29/00</b>	<b>225.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ <b>225.00</b>	
<b>Kannath Plevan</b> 919 Third Avenue New York, NY 10022	<b>Skadden, Arps</b>	<b>09/29/00</b>	<b>401.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ <b>401.00</b>	

**SUBTOTAL** of Receipts This Page (optional) ..... **2,414.00**

**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 **6** OF **26**  
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 Alan Myers 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  525.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date		\$ 525.00	
B. Full Name, Mailing Address and ZIP Code J. Gregory Milroe 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  525.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date		\$ 525.00	
C. Full Name, Mailing Address and ZIP Code Marcia Nirenstein 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  285.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date		\$ 285.00	
D. Full Name, Mailing Address and ZIP Code Robert Pincus One Rodney Square Wilmington, DE 19898	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	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	
E. Full Name, Mailing Address and ZIP Code Michael Rogan 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	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	
F. Full Name, Mailing Address and ZIP Code Louis Freeman 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  401.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date		\$ 401.00	
G. Full Name, Mailing Address and ZIP Code Robert Sheehan 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date		\$ 750.00	

SUBTOTAL of Receipts This Page (optional)

3,386.00

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 **7** OF **26**

FOR LINE NUMBER **11 8 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 Ralph Arditi 4 Times Square New York, NY 10036  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Partner  Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 450.00
B. Full Name, Mailing Address and ZIP Code Susan Saltzstein 4 Times Square New York, NY 10036  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Partner  Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 225.00
C. Full Name, Mailing Address and ZIP Code Daniel Stoller 1440 New York Avenue, NW Washington, DC 20005  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 450.00
D. Full Name, Mailing Address and ZIP Code Matthew Rosen 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 600.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 600.00
E. Full Name, Mailing Address and ZIP Code Charles Mulaney 333 West Wacker Drive Chicago, IL 60606  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 750.00
F. Full Name, Mailing Address and ZIP Code Harvey Uris 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 450.00
G. Full Name, Mailing Address and ZIP Code Eric Waxman 300 South Grand Avenue Los Angeles, CA 90071  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 401.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 401.00

**SUBTOTAL** of Receipts This Page (optional) .....

**3,326.00**

**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 **8** OF **26**

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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Estes, III 1440 New York Avenue, NW Washington, DC 20005	Skadden, Arps	09/29/00	270.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>Attorney</b>	Aggregate Year-to-Date > \$ 270.00	
Neil Leff 919 Third Avenue New York, NY 10022	Skadden, Arps	09/29/00	356.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>Attorney</b>	Aggregate Year-to-Date > \$ 356.00	
Angela Garcia 919 Third Avenue New York, NY 10022	Skadden, Arps	09/29/00	270.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>Attorney</b>	Aggregate Year-to-Date > \$ 270.00	
Martin Klepper 1440 New York Avenue, NW Washington, DC 10005	Skadden, Arps	09/29/00	600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>Attorney</b>	Aggregate Year-to-Date > \$ 600.00	
Jeffrey Christie Suntec City Tower 2,9 Temase Singapore, SI 0718	Skadden, Arps	09/29/00	323.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>Attorney</b>	Aggregate Year-to-Date > \$ 323.00	
Thomas Well, Jr. 1800 Smith Street Houston, TX 77002	Skadden, Arps	09/29/00	296.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>Attorney</b>	Aggregate Year-to-Date > \$ 296.00	
Garrett Waltzer 300 South Grand Avenue Los Angeles, CA 90071	Skadden, Arps	09/29/00	270.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>Attorney</b>	Aggregate Year-to-Date > \$ 270.00	

**SUBTOTAL** of Receipts This Page (optional) ..... **2,385.00**

**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

<b>A. Full Name, Mailing Address and ZIP Code</b> Peter Simshauser 300 So. Grand Avenue Los Angeles, CA 90071	<b>Name of Employer</b> Skadden, Arps	<b>Date (month, day, year)</b> 09/29/00	<b>Amount of Each Receipt This Period</b> 356.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> \$ 356.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> Warren Lavey 333 West Wacker Drive Chicago, IL 60606	<b>Name of Employer</b> Skadden, Arps	<b>Date (month, day, year)</b> 09/29/00	<b>Amount of Each Receipt This Period</b> 401.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> \$ 401.00	
<b>C. Full Name, Mailing Address and ZIP Code</b> Linda Hayman 919 Third Avenue New York, NY 10022	<b>Name of Employer</b> Skadden, Arps	<b>Date (month, day, year)</b> 09/29/00	<b>Amount of Each Receipt This Period</b> 323.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> \$ 323.00	
<b>D. Full Name, Mailing Address and ZIP Code</b> Harold Moore 919 Third Avenue New York, NY 10022	<b>Name of Employer</b> Skadden, Arps	<b>Date (month, day, year)</b> 09/29/00	<b>Amount of Each Receipt This Period</b> 525.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> \$ 525.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> John Mangan 1440 New York Avenue, NW Washington, DC 20005	<b>Name of Employer</b> Skadden, Arps	<b>Date (month, day, year)</b> 09/29/00	<b>Amount of Each Receipt This Period</b> 450.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> \$ 450.00	
<b>F. Full Name, Mailing Address and ZIP Code</b> Peter Mc Kenna 919 Third Avenue New York, NY 10022	<b>Name of Employer</b> Skadden, Arps	<b>Date (month, day, year)</b> 09/29/00	<b>Amount of Each Receipt This Period</b> 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> \$ 600.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> Mitchell Ettinger 1440 New York Avenue, NW Washington, DC 20005	<b>Name of Employer</b> Skadden, Arps	<b>Date (month, day, year)</b> 09/29/00	<b>Amount of Each Receipt This Period</b> 356.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> \$ 356.00	

**SUBTOTAL of Receipts This Page (optional)** ..... **3,011.00**

**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 **10** OF **26**  
FOR LINE NUMBER **11 a**

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 Saul Pitcher 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps  Occupation Partner	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 225.00	
B. Full Name, Mailing Address and ZIP Code David Zornow 4 Times Square New York, NY 10036	Name of Employer Skadden, Arps  Occupation Partner	Date (month, day, year)  09/29/00	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	
C. Full Name, Mailing Address and ZIP Code Andrew Kanoe 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  356.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 356.00	
D. Full Name, Mailing Address and ZIP Code Edward Meehan 1440 New York Avenue, N.W. Washington, DC 20005	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  248.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 248.00	
E. Full Name, Mailing Address and ZIP Code John Wm. Butler 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	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 > \$ 600.00	
F. Full Name, Mailing Address and ZIP Code James Carroll One Beacon Street Boston, MA 02108	Name of Employer Skadden, Arps  Occupation Partner	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  248.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 248.00	
G. Full Name, Mailing Address and ZIP Code Alan Kriegel 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  356.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 356.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2,483.00</b>
<b>TOTAL</b> 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 **11** OF **26**

FOR LINE NUMBER **11 a 1**

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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
<b>Benjamin Neadell</b> 919 Third Avenue New York, NY 10022	<b>Skadden, Arps</b> Occupation <b>Attorney</b>	<b>09/29/00</b>	<b>750.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > <b>1</b>	<b>750.00</b>	
<b>Barnet Phillips</b> 919 Third Ave. New York, NY 10022	<b>Skadden, Arps</b> Occupation <b>Attorney</b>	<b>09/29/00</b>	<b>450.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > <b>2</b>	<b>450.00</b>	
<b>Andrew Sandler</b> 1440 New York Avenue, NW Washington, DC 20005	<b>Skadden, Arps</b> Occupation <b>Attorney</b>	<b>09/29/00</b>	<b>323.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > <b>3</b>	<b>323.00</b>	
<b>Peter Atkins</b> 919 Third Avenue New York, NY 10022	<b>Skadden, Arps</b> Occupation <b>Attorney</b>	<b>09/29/00</b>	<b>800.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > <b>4</b>	<b>800.00</b>	
<b>Sally McDonal Henry</b> 919 Third Avenue New York, NY 10022	<b>Skadden, Arps</b> Occupation <b>Attorney</b>	<b>09/29/00</b>	<b>270.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > <b>5</b>	<b>270.00</b>	
<b>Richard Grossman</b> 919 Third Avenue New York, NY 10022	<b>Skadden, Arps</b> Occupation <b>Attorney</b>	<b>09/29/00</b>	<b>248.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > <b>6</b>	<b>248.00</b>	
<b>Neal Stoll</b> 919 Third Avenue New York, NY 10022	<b>Skadden, Arps</b> Occupation <b>Attorney</b>	<b>09/29/00</b>	<b>401.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > <b>6</b>	<b>401.00</b>	

**SUBTOTAL** of Receipts This Page (optional) .....

**3,342.00**

**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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**NAME OF COMMITTEE (in Full)**  
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and ZIP Code Patricia Mora Chuff One Rodney Square Wilmington, DE 19899  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 356.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 356.00
B. Full Name, Mailing Address and ZIP Code Howard Eilin 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 270.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 270.00
C. Full Name, Mailing Address and ZIP Code Jeffrey Lichtman 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 323.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 323.00
D. Full Name, Mailing Address and ZIP Code F. Eugene Hiigel 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 356.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 356.00
E. Full Name, Mailing Address and ZIP Code Seth Schwartz 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 356.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 356.00
F. Full Name, Mailing Address and ZIP Code Stuart Finkelstein 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 401.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 401.00
G. Full Name, Mailing Address and ZIP Code Eric Cochran 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 401.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 401.00

<b>SUBTOTAL of Receipts This Page (optional)</b> .....	<b>2,463.00</b>
<b>TOTAL This Period (last page this line number only)</b> .....	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 13 OF 26

FOR LINE NUMBER 11a

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

A. Full Name, Mailing Address and ZIP Code Hilary Fouikes 60308 Frankfurt am MAIN Frankfurt, GE	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  323.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 323.00	
B. Full Name, Mailing Address and ZIP Code Peter Krupp 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  401.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 401.00	
C. 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)  09/29/00	Amount of Each Receipt this Period  401.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 401.00	
D. Full Name, Mailing Address and ZIP Code Ronald Laurie 333 West Hacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  356.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 356.00	
E. Full Name, Mailing Address and ZIP Code Moshe Kushman 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  248.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 248.00	
F. Full Name, Mailing Address and ZIP Code Curtis Barnette 819 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  323.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 323.00	
G. Full Name, Mailing Address and ZIP Code Charles Smith 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  296.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 296.00	

SUBTOTAL of Receipts This Page (optional) .....	2,348.00
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 **14** OF **26**  
FOR LINE NUMBER **11 a**

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 Jonathan Friedman 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  248.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 248.00	
B. Full Name, Mailing Address and ZIP Code Gary MacDonald 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps  Occupation Partner	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 225.00	
C. Full Name, Mailing Address and ZIP Code Robert Copen 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  248.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 248.00	
D. Full Name, Mailing Address and ZIP Code David Reamer 300 South Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 225.00	
E. Full Name, Mailing Address and ZIP Code Matthew Kipp 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 225.00	
F. Full Name, Mailing Address and ZIP Code Frank Bayouth 1600 Smith Street Suite 4460 Houston, TX 77002	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/25/00	Amount of Each Receipt this Period  225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 225.00	
G. Full Name, Mailing Address and ZIP Code Rand April 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	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	

SUBTOTAL of Receipts This Page (optional)

1,846.00

TOTAL This Period (last page this line number only)



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 15 OF 26

FOR LINE NUMBER 1131

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
<b>Audrey Sokoloff</b> 919 Third Avenue New York, NY 10022	<b>Skadden, Arps</b>	09/29/00	225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ 225.00	
<b>Stephen Banker</b> 919 Third Avenue New York, NY 10022	<b>Skadden, Arps</b>	09/29/00	401.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ 401.00	
<b>Pankaj Sinha</b> 1440 New York Ave., N.W. Washington, DC 20005	<b>Skadden, Arps</b>	09/29/00	248.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ 248.00	
<b>Janet Goatz</b> 1440 New York Avenue, NW Washington, DC 20005	<b>Skadden, Arps</b>	09/29/00	296.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ 296.00	
<b>Margaret Brown</b> One Beacon Street Boston, MA 02108	<b>Skadden, Arps</b>	09/29/00	401.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ 401.00	
<b>Anthony Clark</b> One Rodney Square Wilmington, DE 19899	<b>Skadden, Arps</b>	09/29/00	358.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ 358.00	
<b>John Rayis</b> 300 So. Grand Avenue Los Angeles, CA 90071	<b>Skadden, Arps</b>	09/29/00	450.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ 450.00	

SUBTOTAL of Receipts This Page (optional)

2,377.00

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 **16** OF **26**

FOR LINE NUMBER **11 a**

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

<p><b>A. Full Name, Mailing Address and ZIP Code</b> William Sweet 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><b>Name of Employer</b> Skadden, Arps</p> <p><b>Occupation</b> Attorney</p> <p><b>Aggregate Year-to-Date</b> &gt; \$ 401.00</p>	<p><b>Date (month, day, year)</b> 09/29/00</p>	<p><b>Amount of Each Receipt this Period</b> 401.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Randall Doud 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><b>Name of Employer</b> Skadden, Arps</p> <p><b>Occupation</b> Attorney</p> <p><b>Aggregate Year-to-Date</b> &gt; \$ 450.00</p>	<p><b>Date (month, day, year)</b> 09/29/00</p>	<p><b>Amount of Each Receipt this Period</b> 450.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> Susan Sutherland 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><b>Name of Employer</b> Skadden, Arps</p> <p><b>Occupation</b> Attorney</p> <p><b>Aggregate Year-to-Date</b> &gt; \$ 296.00</p>	<p><b>Date (month, day, year)</b> 09/29/00</p>	<p><b>Amount of Each Receipt this Period</b> 296.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Wallace Schwartz 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><b>Name of Employer</b> Skadden, Arps</p> <p><b>Occupation</b> Attorney</p> <p><b>Aggregate Year-to-Date</b> &gt; \$ 450.00</p>	<p><b>Date (month, day, year)</b> 09/29/00</p>	<p><b>Amount of Each Receipt this Period</b> 450.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> J. Michael Schell 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><b>Name of Employer</b> Skadden, Arps</p> <p><b>Occupation</b> Attorney</p> <p><b>Aggregate Year-to-Date</b> &gt; \$ 750.00</p>	<p><b>Date (month, day, year)</b> 09/29/00</p>	<p><b>Amount of Each Receipt this Period</b> 750.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Edward Yodowitz 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><b>Name of Employer</b> Skadden, Arps</p> <p><b>Occupation</b> Attorney</p> <p><b>Aggregate Year-to-Date</b> &gt; \$ 450.00</p>	<p><b>Date (month, day, year)</b> 09/29/00</p>	<p><b>Amount of Each Receipt this Period</b> 450.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Edward Welch One Rodney Square Wilmington, DE 19899</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Name of Employer</b> Skadden, Arps</p> <p><b>Occupation</b> Attorney</p> <p><b>Aggregate Year-to-Date</b> &gt; \$ 358.00</p>	<p><b>Date (month, day, year)</b> 09/29/00</p>	<p><b>Amount of Each Receipt this Period</b> 358.00</p>

**SUBTOTAL of Receipts This Page (optional)** .....

**3,153.00**

**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

<b>A. Full Name, Mailing Address and ZIP Code</b> Joseph Halliday 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Skadden, Arps  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 600.00	<b>Date (month, day, year)</b>  08/29/00	<b>Amount of Each Receipt this Period</b>  600.00
<b>B. Full Name, Mailing Address and ZIP Code</b> Marco Schnabl 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Skadden, Arps  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 356.00	<b>Date (month, day, year)</b>  09/29/00	<b>Amount of Each Receipt this Period</b>  356.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Phyllis Korff 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Skadden, Arps  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 450.00	<b>Date (month, day, year)</b>  09/29/00	<b>Amount of Each Receipt this Period</b>  450.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Jeffrey Glekel 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Skadden, Arps  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 356.00	<b>Date (month, day, year)</b>  09/29/00	<b>Amount of Each Receipt this Period</b>  356.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Stephen Hamilton 1440 New York Avenue, NW Washington, DC 20005  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Skadden, Arps  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 356.00	<b>Date (month, day, year)</b>  09/29/00	<b>Amount of Each Receipt this Period</b>  356.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Richard Brusca 1440 New York Avenue, NW Washington, DC 20005  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Skadden, Arps  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 356.00	<b>Date (month, day, year)</b>  09/29/00	<b>Amount of Each Receipt this Period</b>  356.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Marc Hanrahan 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Skadden, Arps  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 401.00	<b>Date (month, day, year)</b>  08/29/00	<b>Amount of Each Receipt this Period</b>  401.00

**SUBTOTAL** of Receipts This Page (optional) .....

2,875.00

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

<b>A. Full Name, Mailing Address and ZIP Code</b> <b>Keith Krakaur</b> <b>919 Third Avenue</b> <b>New York, NY 10022</b>	<b>Name of Employer</b> <b>Skadden, Arps</b>	<b>Date (month, day, year)</b> <b>09/29/00</b>	<b>Amount of Each Receipt this Period</b>  <b>270.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> <b>Attorney</b>	<b>Aggregate Year-to-Date</b> > \$ <b>270.00</b>	
<b>B. Full Name, Mailing Address and ZIP Code</b> <b>Irene Sullivan</b> <b>919 Third Avenue</b> <b>New York, NY 10022</b>	<b>Name of Employer</b> <b>Skadden, Arps</b>	<b>Date (month, day, year)</b> <b>09/29/00</b>	<b>Amount of Each Receipt this Period</b>  <b>525.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> <b>Attorney</b>	<b>Aggregate Year-to-Date</b> > \$ <b>525.00</b>	
<b>C. Full Name, Mailing Address and ZIP Code</b> <b>Christina Tchen</b> <b>333 West Wacker Drive</b> <b>Chicago, IL 60606</b>	<b>Name of Employer</b> <b>Skadden, Arps</b>	<b>Date (month, day, year)</b> <b>09/29/00</b>	<b>Amount of Each Receipt this Period</b>  <b>356.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> <b>Attorney</b>	<b>Aggregate Year-to-Date</b> > \$ <b>356.00</b>	
<b>D. Full Name, Mailing Address and ZIP Code</b> <b>Jerome Cohen</b> <b>300 South Grand Avenue</b> <b>Los Angeles, CA 90071</b>	<b>Name of Employer</b> <b>Skadden, Arps</b>	<b>Date (month, day, year)</b> <b>09/29/00</b>	<b>Amount of Each Receipt this Period</b>  <b>525.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> <b>Attorney</b>	<b>Aggregate Year-to-Date</b> > \$ <b>525.00</b>	
<b>E. Full Name, Mailing Address and ZIP Code</b> <b>Michael Edwar Hatchard</b> <b>One Canada Square</b> <b>London E14 5DS, EN</b>	<b>Name of Employer</b> <b>Skadden, Arps</b>	<b>Date (month, day, year)</b> <b>09/29/00</b>	<b>Amount of Each Receipt this Period</b>  <b>401.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> <b>Attorney</b>	<b>Aggregate Year-to-Date</b> > \$ <b>401.00</b>	
<b>F. Full Name, Mailing Address and ZIP Code</b> <b>Jeffrey Dastool</b> <b>300 So. Grand Avenue</b> <b>Los Angeles, CA 90071</b>	<b>Name of Employer</b> <b>Skadden, Arps</b>	<b>Date (month, day, year)</b> <b>09/29/00</b>	<b>Amount of Each Receipt this Period</b>  <b>356.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> <b>Attorney</b>	<b>Aggregate Year-to-Date</b> > \$ <b>356.00</b>	
<b>G. Full Name, Mailing Address and ZIP Code</b> <b>Edward Crane</b> <b>333 West Wacker Drive</b> <b>Chicago, IL 60606</b>	<b>Name of Employer</b> <b>Skadden, Arps</b>	<b>Date (month, day, year)</b> <b>09/29/00</b>	<b>Amount of Each Receipt this Period</b>  <b>401.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> <b>Attorney</b>	<b>Aggregate Year-to-Date</b> > \$ <b>401.00</b>	

**SUBTOTAL of Receipts This Page (optional)** .....

**2,834.00**

**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 19 OF 26  
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 Fred Goldberg Jr. 1440 New York Avenue, NW Washington, DC 20005  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 600.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 600.00
B. Full Name, Mailing Address and ZIP Code Gregg Noel 300 South Grand Avenue Los Angeles, CA 90071  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 401.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 401.00
C. Full Name, Mailing Address and ZIP Code Pamela Olson 1440 New York Avenue, NW Washington, DC 20005  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 356.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 356.00
D. Full Name, Mailing Address and ZIP Code William Kirk Wallace 919 Third Ave. New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 270.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 270.00
E. Full Name, Mailing Address and ZIP Code David Hansen 525 University Avenue Suite 220 Palo Alto, CA 94301  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 248.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 248.00
F. Full Name, Mailing Address and ZIP Code Lynn McGovern 333 West Wacker Drive Chicago, IL 60606  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 225.00
G. Full Name, Mailing Address and ZIP Code Lynn Coleman 1440 New York Avenue, NW Washington, DC 20005  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 09/29/00	Amount of Each Receipt this Period 450.00

SUBTOTAL of Receipts This Page (optional) ..... 2,550.00  
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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NAME OF COMMITTEE (In Full)  
Skadden Arps Political Action Committee

<p><b>A. Full Name, Mailing Address and ZIP Code</b> William Rubenstein 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>450.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>450.00</b></p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Charles Morgan 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>450.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>450.00</b></p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> Richard Kalikow 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>323.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>323.00</b></p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Katherine Bristor 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>401.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>401.00</b></p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> David Springer 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 <b>Skadden, Arps</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$ <b>290.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>290.00</b></p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Christopher Baker 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>356.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>356.00</b></p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Randall Rademaker 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>401.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>401.00</b></p>

<p>SUBTOTAL of Receipts This Page (optional) .....</p>	<p><b>2,671.00</b></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 **21** OF **26**

FOR LINE NUMBER **11 a**

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

<b>A. Full Name, Mailing Address and ZIP Code</b> <b>Kenneth Gross</b> <b>1440 New York Avenue, NW</b> <b>Washington, DC 20005</b>	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt this Period <b>270.00</b>
	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ <b>270.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>B. Full Name, Mailing Address and ZIP Code</b> <b>Ann Pollock</b> <b>333 West Wacker Drive</b> <b>Chicago, IL 60606</b>	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt this Period <b>401.00</b>
	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ <b>401.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>C. Full Name, Mailing Address and ZIP Code</b> <b>Mitchell Solomon</b> <b>919 Third Avenue</b> <b>New York, NY 10022</b>	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt this Period <b>401.00</b>
	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ <b>401.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>D. Full Name, Mailing Address and ZIP Code</b> <b>Ronald Weiss</b> <b>919 Third Ave.</b> <b>New York, NY 10022</b>	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt this Period <b>248.00</b>
	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ <b>248.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>E. Full Name, Mailing Address and ZIP Code</b> <b>Daniel DeVito</b> <b>919 Third Avenue</b> <b>New York, NY 10022</b>	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt this Period <b>296.00</b>
	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ <b>296.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>F. Full Name, Mailing Address and ZIP Code</b> <b>Timothy Nelsen</b> <b>333 West Wacker Drive</b> <b>Chicago, IL 60606</b>	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt this Period <b>356.00</b>
	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ <b>356.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>G. Full Name, Mailing Address and ZIP Code</b> <b>John Osborn</b> <b>919 Third Avenue</b> <b>New York, NY 10022</b>	Name of Employer <b>Skadden, Arps</b>	Date (month, day, year) <b>09/29/00</b>	Amount of Each Receipt this Period <b>401.00</b>
	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ <b>401.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

**2,373.00**

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 **22** OF **26**

FOR LINE NUMBER **11 a**

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 Vaughn Williams 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt This Period  356.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date		\$ 356.00	
B. Full Name, Mailing Address and ZIP Code Raoul Kennedy Four Embarcadero Center San Francisco, CA 94111	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt This Period  356.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date		\$ 356.00	
C. Full Name, Mailing Address and ZIP Code Darrel Hiebar 300 So. Grand Avenue Los Angeles, CA 90071	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt This Period  356.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date		\$ 356.00	
D. Full Name, Mailing Address and ZIP Code Henry Huser Avenue Louise 523 Box 30 1050 Brussels, BE	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt This Period  248.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date		\$ 248.00	
E. Full Name, Mailing Address and ZIP Code Edmund Duffy 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt This Period  356.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date		\$ 356.00	
F. Full Name, Mailing Address and ZIP Code Seth Jacobson 333 West Wacker Drive Chicago, IL 60606	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt This Period  270.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date		\$ 270.00	
G. Full Name, Mailing Address and ZIP Code Mark Smith 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt This Period  401.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date		\$ 401.00	

**SUBTOTAL** of Receipts This Page (optional) ..... **2,343.00**

**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 23 OF 26  
FOR LINE NUMBER 11 & 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 Thomas Allingham One Rodney Square Wilmington, DE 19899	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  401.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 401.00	
B. Full Name, Mailing Address and ZIP Code Michael Glaser 30/F Peregrine Tower 89 Queensway Central, HK	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  401.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 401.00	
C. Full Name, Mailing Address and ZIP Code Shapard Goldfein 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	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	
D. Full Name, Mailing Address and ZIP Code Phillp Harris 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  356.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 356.00	
E. Full Name, Mailing Address and ZIP Code Fred White 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	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 > \$ 600.00	
F. Full Name, Mailing Address and ZIP Code William Pelster 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  323.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 323.00	
G. Full Name, Mailing Address and ZIP Code George Zimmerman 918 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps  Occupation Attorney	Date (month, day, year)  09/29/00	Amount of Each Receipt this Period  401.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 401.00	

SUBTOTAL of Receipts This Page (optional)

2,932.00

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
<b>Robert Zimet</b> 919 Third Avenue New York, NY 10022	<b>Skadden, Arps</b> Occupation <b>Attorney</b>	09/29/00	525.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	525.00	
<b>Nicholas Saggese</b> 300 South Grand Avenue Los Angeles, CA 90071	<b>Skadden, Arps</b> Occupation <b>Attorney</b>	09/29/00	525.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	525.00	
<b>Wayne Whalen</b> 333 West Wacker Drive Chicago, IL 60606	<b>Skadden, Arps</b> Occupation <b>Attorney</b>	09/29/00	600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	600.00	
<b>Albert Turkus</b> 1440 New York Avenue, NW Washington, DC 20005	<b>Skadden, Arps</b> Occupation <b>Attorney</b>	09/29/00	401.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	401.00	
<b>Regina Oshan</b> 919 Third Avenue New York, NY 10022	<b>Skadden, Arps</b> Occupation <b>Attorney</b>	09/29/00	248.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	248.00	
<b>Kenneth Barlin</b> 1440 New York Avenue, NW Washington, DC 20005	<b>Skadden, Arps</b> Occupation <b>Attorney</b>	09/29/00	356.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	356.00	
<b>Douglas Nordlinger</b> 919 Third Avenue New York, NY 10022	<b>Skadden, Arps</b> Occupation <b>Attorney</b>	09/29/00	401.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	401.00	

**SUBTOTAL of Receipts This Page (optional)** ..... **3,056.00**

**TOTAL This Period (last page this line number only)** .....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

PAGE **25** OF **26**

FOR LINE NUMBER **11 a 1**

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

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Joseph Flom 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>825.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>825.00</b></p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Rodd Schreiber 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>270.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>270.00</b></p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> Susan Getzendanne 333 West Hacker 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>356.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>356.00</b></p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Sally Thurston 819 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>356.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>356.00</b></p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Clifford Gross 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>323.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>323.00</b></p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Rodman Ward One Rodney Square Wilmington, DE 19899</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>321.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>321.00</b></p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Bruce Buck One Canada Square, Canary Wharf London, EG</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>450.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>450.00</b></p>

SUBTOTAL of Receipts This Page (optional)

**2,901.00**

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

<p>A. Full Name, Mailing Address and ZIP Code <b>Andrew Faulkner</b> 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>356.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>356.00</b></p>
<p>B. Full Name, Mailing Address and ZIP Code <b>Kenneth Blalain</b> 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>900.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>900.00</b></p>
<p>C. Full Name, Mailing Address and ZIP Code <b>John Gardiner</b> 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>323.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>323.00</b></p>
<p>D. Full Name, Mailing Address and ZIP Code <b>Clifford Naeve</b> 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 <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>525.00</b></p>	<p>Date (month, day, year) <b>09/29/00</b></p>	<p>Amount of Each Receipt this Period <b>525.00</b></p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional) .....

**2,104.00**

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

**72,367.00**

**SCHEDULE A** **ITEMIZED RECEIPTS**  
**\* EXEMPT LEGAL + ADMINISTRATIVE SERVICES \***

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

PAGE 1 OF 1  
 FOR LINE NUMBER 17

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 Brian D. Flynn 1440 New York Avenue, NW Washington, DC 20005	Name of Employer Skadden, Arps  Occupation Legislative Consultant	Date (month, day, year) 09/30/00	Amount of Each Receipt this Period 306.25  (Memo Entry)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 0.00	
B. Full Name, Mailing Address and ZIP Code Mark Ward 1440 New York Ave NW #6-205 Washington, DC 20005	Name of Employer Skadden Arps Slate Meagher & Flom LLP  Occupation Political Reports Analyst	Date (month, day, year) 09/30/00	Amount of Each Receipt this Period 393.75  (Memo Entry)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 0.00	
C. 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 \$	
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 \$	

SUBTOTAL of Receipts This Page (optional)

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 1 OF 1

FOR LINE NUMBER 23

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

**NAME OF COMMITTEE (in Full)**  
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 130 South Capitol Street, SE Washington, DC 20003	Purpose of Disbursement <b>Contribution</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2000	Date (month, day, year) 09/07/00	Amount of Each Disbursement This Period 2,500.00
B. Full Name, Mailing Address and ZIP Code Taxans for Henry Bonilla Po Box 17292 San Antonio, TX 78217	Purpose of Disbursement <b>Henry Bonilla, U.S. HOUSE 23rd TX</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 09/14/00	Amount of Each Disbursement This Period 500.00
C. Full Name, Mailing Address and ZIP Code Pallone for Congress P.O. Box 3176 Long Branch, NJ 07740	Purpose of Disbursement <b>Frank Pallone, U.S. HOUSE 8th NJ</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 09/28/00	Amount of Each Disbursement This Period 500.00
D. Full Name, Mailing Address and ZIP Code A Lot of People Who Support Jeff Bingaman 238 Massachusetts Ave. NE #202 Washington, DC 20002	Purpose of Disbursement <b>Jeff Bingaman, U.S. SENATE NM</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 09/28/00	Amount of Each Disbursement This Period 1,000.00
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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4,500.00
<b>TOTAL</b> This Period (last page this line number only) .....	4,500.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 10/20/00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<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	
CR	10/20/00
PREPARER	DATE PREPARED