

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
 (Summary Page)

APR 15 3 03 PM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Skadden, Arps Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1440 New York Avenue, N.W.,	
CITY, STATE and ZIP CODE Washington, D.C. 20005	2. FEC IDENTIFICATION NUMBER CD0232629
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	

4. TYPE OF REPORT

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

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SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>1/1/96</u> through <u>3/31/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 31,290.29
(b) Cash on Hand at Beginning of Reporting Period	\$ 31,290.29	
(c) Total Receipts (from Line 19)	\$ 0.00	\$ 0.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 31,290.29	\$ 31,290.29
7. Total Disbursements (from Line 20)	\$ 16,500.00	\$ 16,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 14,790.29	\$ 14,790.29
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: Lynn R. Coleman

Signature of Treasurer: Date: 4/15/96

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

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

(revised 1/1/91)

NAME OF COMMITTEE Skadden Arps Political Action Committee		REPORT COVERING PERIOD FROM 1/1/96 TO 3/31/96	
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	0.00	0.00	11(a)(i)
ii. Unitemized	0.00	0.00	11(a)(ii)
iii. Total (add i and ii) >	0.00	0.00	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) >	0.00	0.00	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	0.00	0.00	19
20. Total Federal Receipts (subtract line 18 from line 19) >	0.00	0.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	0.00	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	16,500.00	16,500.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	16,500.00	16,500.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	16,500.00	16,500.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	0.00	0.00	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	0.00	0.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	0.00	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	0.00	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER N/A

MEMO ENTRIES

(EXEMPT LEGAL SERVICES)

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

NAME OF COMMITTEE (in Full)

Skadden Arps Political Action Committee

95030404809

A. Full Name, Mailing Address and ZIP Code Kenneth A. Gross 1440 New York Avenue, N.W. Washington, D.C. 20005	Name of Employer Skadden, Arps, Slate, Meagher & Flom Occupation Attorney Aggregate Year-to-Date > \$ 330.00	Date (month, day, year) 3/31/96	Amount of Each Receipt this Period 330.00 MEMO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps, Slate, Meagher & Flom Occupation Dir. Gov't Affairs Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 3/31/96	Amount of Each Receipt this Period 250.00 MEMO
B. Full Name, Mailing Address and ZIP Code William Whitsitt 1440 New York Avenue, N.W. Washington, D.C. 20005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps, Slate, Meagher & Flom Occupation Legislative Asst. Aggregate Year-to-Date > \$ 340.00	Date (month, day, year) 3/31/96	Amount of Each Receipt this Period 340.00 MEMO
C. Full Name, Mailing Address and ZIP Code Deborah Testerman 1440 New York Avenue, N.W. Washington, D.C. 20005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps, Slate, Meagher & Flom Occupation Reports Analyst Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 3/31/96	Amount of Each Receipt this Period 500.00 MEMO
D. Full Name, Mailing Address and ZIP Code Beth Horstkamp 1440 New York Avenue, N.W. Washington, D.C. 20005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps, Slate, Meagher & Flom Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	1,420.00 MEMO

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)

Sakóden Arps Political Action Committee

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Schaefer for Congress Committee 4451 Brookefield Corp. Drive, #200 Chantilly, VA 22021	Contribution to House Candidate (CD) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1996	2/8/96	500.00
B. Full Name, Mailing Address and ZIP Code Jimmy Hayes for Senate 128 North Columbus Street Alexandria, VA 22314	Contribution to Senate Candidate (LA) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1996	2/28/96	1,000.00
C. Full Name, Mailing Address and ZIP Code Friends of Senator D'Amato PO Box 888 Minneola, NY 11501	Contribution to Senate Candidate (NY) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	2/28/96	1,000.00
D. Full Name, Mailing Address and ZIP Code Democratic Cong. Campaign Committee 430 So. Capitol St., SE Washington, D.C. 20003	Contribution to Party Committee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1996	2/28/96	5,000.00
E. Full Name, Mailing Address and ZIP Code Democratic Senatorial Campaign Com. 430 So. Capitol St., SE Washington, D.C. 20003	Contribution to Party Committee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1996	2/28/96	5,000.00
F. Full Name, Mailing Address and ZIP Code Green for Congress 3610 38th St., NW, #F270 Washington, D.C. 20016	Contribution to House Candidate (TX) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1996	3/7/96	500.00
G. Full Name, Mailing Address and ZIP Code The Majority Leader's Fund 4451 Brookfield Corp. Drive Chantilly, VA 22021	Contribution to Party Committee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1996	3/7/96	1,000.00
H. Full Name, Mailing Address and ZIP Code Hall for Congress Committee PO Box 711 Rockwell, TX 75087	Contribution to House Candidate (TX) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1996	3/7/96	500.00
I. Full Name, Mailing Address and ZIP Code NROC - TX Challengers Fund 3323 Richmond, Ste. C Houston, TX 77098	Contribution to Party Committee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/7/96	2,000.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

16,500.00

**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.

Hand Delivered

DATE OF RECEIPT

4-15-96

First Class Mail

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Registered/Certified Mail

POSTMARKED

No Postmark

Postmark Illegible

Received from the House Office of Records
 and Registration

DATE OF RECEIPT

Received from the Senate Office of Public
 Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

AS
 PREPARER

4-15-96
 DATE PREPARED

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