

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUN 22 11 20 AM '98

1. NAME OF COMMITTEE (in full) International Council of Shopping Centers PAC		2. FEC IDENTIFICATION NUMBER C0021763B
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1033 N. Fairfax St., Ste. 404		
CITY, STATE and ZIP CODE Alexandria, VA 22314	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (See FEC FORM IM)	

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)

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>05/01/98</u> through <u>05/31/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 140,237.31
(b) Cash on Hand at Beginning of Reporting Period	\$ 159,601.02	
(c) Total Receipts (from line 19)	\$ 30,789.05	\$ 72,653.76
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 190,391.07	\$ 212,891.07
7. Total Disbursements (from Line 30)	\$ 4,710.60	\$ 27,210.60
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	\$ 185,680.47	\$ 185,680.47
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:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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

Rebecca M. Sullivan

Signature of Treasurer

Rebecca M Sullivan

Date

6/18/98

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 11/1/91

NAME OF COMMITTEE International Council of Shopping Centers PAC	REPORT COVERING PERIOD	
	FROM: 05/01/98	TO: 05/31/98
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).....	30,500.00	71,250.00
ii. Unitemized.....	0.00	0.00
iii. Total.....(add i and ii)>	30,500.00	71,250.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	0.00	0.00
d. Total Contributions.....(add iii,b and c)>	30,500.00	71,250.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	289.05	1,403.76
18. Transfers from Nonfederal Account for Joint Activity.....	0.00	0.00
19. Total Receipts.....(add 11d,12,13,14,15,16,17, and 18) >	30,789.05	72,653.76
20. Total Federal Receipts.....(subtract line 18 from line 19) >	30,789.05	72,653.76
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share.....	0.00	0.00
ii. Non-Federal Share.....	0.00	0.00
b. Other Federal Operating Expenditures.....	0.00	0.00
c. Total Operating Expenditures.....(Add ai,ii, and b)>	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4,710.60	27,210.60
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C.441e(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees.....	0.00	0.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (Such As PACs).....	0.00	0.00
d. Total Contribution Refunds.....(Add a,b, and c)>	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements.....(Add 21c,22,23,24,25,28,27,28d, and 29) >	4,710.60	27,210.60
31. Total Federal Disbursements.....[Subtract line 21 aii from line 30] >	4,710.60	27,210.60
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans)(from line 11d).....	30,500.00	71,250.00
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (Other than loans)(subtract line 33 from 32).....	30,500.00	71,250.00
35. Total Federal Operating Expenditures.....(add 21 ai and 21 b)>	0.00	0.00
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures.....(subtract line 36 from 35) >	0.00	0.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In full)
International Council of Shopping Centers PAC

<p>A. Full Name, Mailing Address and Zip Code Gary Rappaport 1700 Dove Pt. Ct. Vienna, VA 22182</p>	<p>Name of Employer Rappaport Management Co.</p> <p>Occupation Developer</p>	<p>Date (Month day, Year) 05/05/98</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 5,000.00</p>	
<p>B. Full Name, Mailing Address and Zip Code J.E. Sheinar 777 S. Flagler Dr. Ste. 1106 W. Palm Beach, FL 33401</p>	<p>Name of Employer The Goodman Co.</p> <p>Occupation Developer</p>	<p>Date (Month day, Year) 05/05/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 500.00</p>	
<p>C. Full Name, Mailing Address and Zip Code Charles Lebovitz 6148 Lee Highway 1 Park Place Chattanooga, TN 37421</p>	<p>Name of Employer CBL & Associates Properties</p> <p>Occupation Developer</p>	<p>Date (Month day, Year) 05/06/98</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 2,500.00</p>	
<p>D. Full Name, Mailing Address and Zip Code Paul Sack 3820 Washington Street San Francisco, CA 94118</p>	<p>Name of Employer The Paul Sack Properties</p> <p>Occupation Developer</p>	<p>Date (Month day, Year) 05/06/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 1,000.00</p>	
<p>E. Full Name, Mailing Address and Zip Code Frank Pasquerilla Pasquerilla Plaza Johnstown, PA 15907</p>	<p>Name of Employer Crown American Realty Trust</p> <p>Occupation Developer</p>	<p>Date (Month day, Year) 05/07/98</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 2,500.00</p>	
<p>F. Full Name, Mailing Address and Zip Code Richard Sokolov 7763 Silver Fox Drive Youngstown, OH 44512</p>	<p>Name of Employer Simn DeBartolo Grp.</p> <p>Occupation Developer</p>	<p>Date (Month day, Year) 05/07/98</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 5,000.00</p>	
<p>G. Full Name, Mailing Address and Zip Code R.E. Jacobs 25425 Center Ridge Rd. Cleveland, OH 44145</p>	<p>Name of Employer The Richard E. Jacobs Grp.</p> <p>Occupation Developer</p>	<p>Date (Month day, Year) 05/08/98</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>		<p>Aggregate Year-to-date > \$ 2,500.00</p>	

SUB TOTAL of Receipts This Page (Optional).....>	19,000.00
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 2
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (in full)
International Council of Shopping Centers PAC

<p>A. Full Name, Mailing Address and Zip Code Matthew Bucksbaum 215 Keo Way Des Moines, IA 50309</p>	<p>Name of Employer General Growth Properties</p> <p>Occupation Developer</p>	<p>Date (Month day, Year) 05/08/98</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 5,000.00</p>		
<p>B. Full Name, Mailing Address and Zip Code Marty Cleary 25408 Lake Rd. Bay Village, OH 44145</p>	<p>Name of Employer The Richard E. Jacobs Grp.</p> <p>Occupation Developer</p>	<p>Date (Month day, Year) 05/08/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 500.00</p>		
<p>C. Full Name, Mailing Address and Zip Code William Stiel 601 Spruce Street Winnetka, IL 60093</p>	<p>Name of Employer Walgreens</p> <p>Occupation Developer</p>	<p>Date (Month day, Year) 05/08/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		
<p>D. Full Name, Mailing Address and Zip Code T.J. Connolly 4145 Lawrenceville Hwy. Lilburn, GA 30247</p>	<p>Name of Employer Connolly Realty Services</p> <p>Occupation Developer</p>	<p>Date (Month day, Year) 05/13/98</p>	<p>Amount of Each Receipt this Period 2,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 2,000.00</p>		
<p>E. Full Name, Mailing Address and Zip Code Jim Wilson P.O. Box 4480 Riverchase Galleria Mall Montgomery, AL 36103</p>	<p>Name of Employer Hoover Mall Ltd Ptnshp</p> <p>Occupation Developer</p>	<p>Date (Month day, Year) 05/15/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		
<p>F. Full Name, Mailing Address and Zip Code Mark Levick 2660 Peachtree Rd., NW Atlanta, GA 30305</p>	<p>Name of Employer Altman, Kritzer & Levick PC</p> <p>Occupation Developer</p>	<p>Date (Month day, Year) 05/15/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		
<p>G. Full Name, Mailing Address and Zip Code Ranney Draper 2910 Red Hill Avenue #200 Costa Mesa, CA 92626</p>	<p>Name of Employer Diversified Shopping Centers Ptns.</p> <p>Occupation Developer</p>	<p>Date (Month day, Year) 05/15/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		

SUB TOTAL of Receipts This Page (Optional).....> **11,500.00**

TOTAL this Period (Last page this line number only).....> **30,500.00**

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **17**

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NAME OF COMMITTEE (In full)
International Council of Shopping Centers PAC

A. Full Name, Mailing Address and Zip Code Chase Manhattan Bank 380 Madison Ave. New York, NY 10017	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation Interest	05/31/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 1,403.76		289.05
B. Full Name, Mailing Address and Zip Code			
	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
C. Full Name, Mailing Address and Zip Code			
	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
D. Full Name, Mailing Address and Zip Code			
	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
E. Full Name, Mailing Address and Zip Code			
	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
F. Full Name, Mailing Address and Zip Code			
	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
G. Full Name, Mailing Address and Zip Code			
	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional).....>	289.05
TOTAL this Period (Last page this line number only).....>	289.05

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)
International Council of Shopping Centers PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Friends of Jennifer Dunn P.O. Box 40110 Bellevue, WA 98015	Jennifer Dunn, U.S. HOUSE 8th WA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/06/98	1,210.60
The Coverdell Good Government Committee 425 Second Street, NE Washington, DC 20002	Paul Coverdell, U.S. SENATE GA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/11/98	1,000.00
Ken Calvert for Congress Committee P.O. Box 1414 Riverside, CA 92502	Ken Calvert, U.S. HOUSE 43rd CA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/19/98	500.00
Northup for Congress P.O. Box 7313 Louisville, KY 40257	Anne M. Northup, U.S. HOUSE 3rd KY Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/21/98	500.00
Pascrell for Congress 36 Ivy Street, S.E. Washington, DC 20003	Bill Pascrell, U.S. HOUSE 8th NJ Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/29/98	500.00
Steve Rothman for Congress, Inc. 38 Ivy Street SE Washington, DC 20003	Steven R. Rothman, U.S. HOUSE 9th NJ Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/29/98	1,000.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period

SUB TOTAL of Disbursements this page (Optional) > **4,710.60**

TOTAL this Period (Last page this line number only) > **4,710.60**

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED <i>6-19-98</i>
<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	
<i>JMN</i> PREPARER	<i>6-22-98</i> DATE PREPARED