



RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

POMERANTZ ▫ HAUDEK ▫ BLOCK ▫ GROSSMAN & GROSS LLP

ATTORNEYS AT LAW

MARCI GROSS

E MAIL
mkgross@pomlaw.com

January 31, 2000

**VIA CERTIFIED MAIL/
RETURN RECEIPT REQUESTED
No. P-887-312-268**

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

Re: National Association of Securities and Commercial
Law Attorneys (NASCAT) PAC Committee

Dear Sir or Madam:

Enclosed please find the above-referenced committee's Report of Receipts and Disbursements, with attached Schedule A (itemized Receipts); and Schedule B (Itemized Disbursements) for the period ended December 31, 1999.

Yours truly,

Marc I. Gross

MIG:sgs
Enclosures

cc: Christine C. Neville, Esq.

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 FEB -3 P 1:49

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
**National Association of Securities and Commercial
Law Attorneys (NASCAT) PAC**

ADDRESS (number and street) Check if different than previously reported
**c/o Pomerantz, Haudek, Block
100 Park Avenue**

CITY, STATE and ZIP CODE:
New York, NY 10017

2. FEC IDENTIFICATION NUMBER
000236687

3. 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
- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

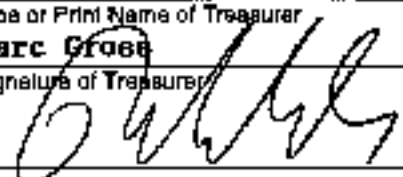
SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>7/1/99</u> through <u>12/31/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ <u>230.04</u>
(b) Cash on Hand at Beginning of Reporting Period	\$ <u>3,556.34</u>	
(c) Total Receipts (from Line 19)	\$ <u>8,000.00</u>	\$ <u>22,000.00</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>11,556.34</u>	\$ <u>22,230.04</u>
7. Total Disbursements (from Line 30)	\$ <u>2,966.91</u>	\$ <u>13,640.61</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>8,589.43</u>	\$ <u>8,589.43</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <u>0</u>	For further information contact: Federal Election Commission 889 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <u>0</u>	

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

Marc Grose

Signature of Treasurer



Date

1/31/00

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 NASCAT PAC		REPORT COVERING PERIOD FROM 7/1/99 TO 12/31/99	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	8,000.00	22,000.00	11(a)
ii. Unitemized	0	0	11(a)
ii. Total (add i and ii) >	8,000.00	22,000.00	11(b)
b. Political Party Committees	0	0	11(b)
c. Other Political Committees (such as PACs)	0	0	11(c)
d. Total Contributions (add a i, b and c) >	8,000.00	22,000.00	11(c)
12. Transfers From Affiliated/Other Party Committees	0	0	12
13. All Loans Received	0	0	13
14. Loan Repayments Received	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0	17
18. Transfers from Nonfederal Account for Joint Activity	0	0	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	8,000.00	22,000.00	19
20. Total Federal Receipts (subtract line 18 from line 19) >	8,000.00	22,000.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	0	21(a)
ii. Non-Federal Share	0	0	21(b)
b. Other Federal Operating Expenditures	0	32.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0	32.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	2,966.91	13,608.61	23
24. Independent Expenditures (use Schedule E)	0	0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26. Loan Repayments Made	0	0	26
27. Loans Made	0	0	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0	0	28(a)
b. Political Party Committees	0	0	28(b)
c. Other Political Committees (such as PACs)	0	0	28(c)
d. Total Contribution Refunds (add a, b and c) >	0	0	28(d)
29. Other Disbursements	0	0	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	2,966.91	13,640.61	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) >	2,966.91	13,640.61	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	8,000.00	22,000.00	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	8,000.00	22,000.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0	32.00	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0	32.00	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
FOR LINE NUMBER 11

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)

NASCAT PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Berman, DeValerio & Pease One Liberty Square Boston, MA 02109 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Partnership Occupation:	7/23/99	1,000.00
Aggregate Year-to-Date > \$ 2,000.00			
Norman Berman One Liberty Square Boston, MA 02109 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Berman, DeValerio & Pease Occupation: Partner	7/23/99	250.00 Memo Partnership Allocation
Aggregate Year-to-Date > \$ 500.00			
Glen DeValerio One Liberty Square Boston, MA 02109 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Berman, DeValerio & Pease Occupation: Partner	7/23/99	250.00 Memo Partnership Allocation
Aggregate Year-to-Date > \$ 500.00			
Peter Pease One Liberty Square Boston, MA 02109 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Berman, DeValerio & Pease Occupation: Partner	7/23/99	250.00 Memo Partnership Allocation
Aggregate Year-to-Date > \$ 500.00			
Jeff Block One Liberty Square Boston, MA 02109 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Berman, DeValerio & Pease Occupation: Partner	7/23/99	250.00 Memo Partnership Allocation
Aggregate Year-to-Date > \$ 500.00			
Cohen, Milstein, Hanfeld & Toll 1100 New York Avenue, NW, Suite 500 West Washington, DC 20005 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Partnership Occupation:	11/5/99	1,000.00
Aggregate Year-to-Date > \$ 1,000.00			
Herbert E. Milstein 1100 New York Avenue, NW, Suite 500 West Washington, DC 20005 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Cohen, Milstein, Hanfeld & Toll Occupation: Partner	11/5/99	250.00 Memo Partnership Allocation
Aggregate Year-to-Date > \$ 250.00			

SUBTOTAL of Receipts This Page (optional) 2,000.00

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 **3**
FOR LINE NUMBER **11a1**

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NAME OF COMMITTEE (in Full)

NASCAT PAC

<p>A. Full Name, Mailing Address and ZIP Code</p> <p>Michael Haufeld 1100 New York Avenue, NW, Suite 500 West 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 Cohen, Milstein, Haufeld & Toll</p> <p>Occupation Partner</p>	<p>Date (month, day, year) 11/5/99</p>	<p>Amount of Each Receipt this Period 250.00 Memo Partnership Allocation</p>
<p>Aggregate Year-to-Date > \$ 250.00</p>			
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Steve Toll 1100 New York Avenue, NW, Suite 500 West 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 Cohen, Milstein, Haufeld & Toll</p> <p>Occupation Partner</p>	<p>Date (month, day, year) 11/5/99</p>	<p>Amount of Each Receipt this Period 250.00 Memo Partnership Allocation</p>
<p>Aggregate Year-to-Date > \$ 250.00</p>			
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Andrew Friedman 1100 New York Avenue, NW, Suite 500 West 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 Cohen, Milstein, Haufeld & Toll</p> <p>Occupation Partner</p>	<p>Date (month, day, year) 11/5/99</p>	<p>Amount of Each Receipt this Period 250.00 Memo Partnership Allocation</p>
<p>Aggregate Year-to-Date > \$ 250.00</p>			
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Finkelstein Thompson 1055 Thomas Jefferson Street, NW, Suite 601 Washington, DC 20007</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Partnership</p> <p>Occupation</p>	<p>Date (month, day, year) 11/1/99</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>Aggregate Year-to-Date > \$ 5,000.00</p>			
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Barton H. Finkelstein 1055 Thomas Jefferson Street, NW, Suite 601 Washington, DC 20007</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Finkelstein Thompson</p> <p>Occupation Partner</p>	<p>Date (month, day, year) 11/1/99</p>	<p>Amount of Each Receipt this Period 2500.00 Memo Partnership Allocation</p>
<p>Aggregate Year-to-Date > \$ 2,500.00</p>			
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Douglas Thompson 1055 Thomas Jefferson Street, NW, Suite 601 Washington, DC 20007</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Finkelstein Thompson</p> <p>Occupation Partner</p>	<p>Date (month, day, year) 11/1/99</p>	<p>Amount of Each Receipt this Period 2500.00 Memo Partnership Allocation</p>
<p>Aggregate Year-to-Date > \$ 2,500.00</p>			
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Lockridge Grindal Naues PLLP 2200 Washington Square 100 Washington Avenue South Minneapolis, MN 55401</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Partnership</p> <p>Occupation</p>	<p>Date (month, day, year) 11/2/99</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Aggregate Year-to-Date > \$ 1,000.00</p>			

SUBTOTAL of Receipts This Page (optional) **6,000.00**

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 OF
3 3
FOR LINE NUMBER
11a /

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NAME OF COMMITTEE (In Full)

NASCAT PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard A. Lockridge 2200 Washington Square 100 Washington Avenue South Minneapolis, MN 55401	Lockridge, Grindal Nauen PLLP	11/2/99	333.34 Memo Partnership Allocation
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner		
Aggregate Year-to-Date > \$ 333.34			
H. Theodore Grindal 2200 Washington Square 100 Washington Avenue South Minneapolis, MN 55401	Lockridge, Grindal Nauen PLLP	11/2/99	333.33 Memo Partnership Allocation
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner		
Aggregate Year-to-Date > \$ 333.33			
Charles N. Nauen 2200 Washington Square 100 Washington Avenue South Minneapolis, MN 55401	Lockridge, Grindal Nauen PLLP	11/2/99	333.33 Memo Partnership Allocation
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner		
Aggregate Year-to-Date > \$ 333.33			
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):	Occupation		
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):	Occupation		
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):	Occupation		
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):	Occupation		
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional) 0

TOTAL This Period (last page this line number only) 8,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate
schedules
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)

NASCAT PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution (MI-10) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year)	Amount of Each Disbursement this Period
Bonior for Congress 3270 Grandview Court Shelby Township, MI 48316		10/13/99	2,000.00
B. Full Name, Mailing Address and ZIP Code Cornahan for Senate 406 North Main Street Rolla, MO 65401	Name of Employer Contribution (MO-Senate) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/14/99	1,000.00
C. Full Name, Mailing Address and ZIP Code Inverness Hotel 200 Inverness Drive West Englewood, CO 80112	Name of Employer In-Kind Reception for Bonior for Congress (MI-10) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/99	966.91
D. Full Name, Mailing Address and ZIP Code Feingold Senate Committee P.O. Box 620062 Middleton, WI 53562	Name of Employer Void of 10/98 Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	12/31/99	(1,000.00)
E. Full Name, Mailing Address and ZIP Code	Name of Employer 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	Name of Employer 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	Name of Employer 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	Name of Employer 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	Name of Employer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Receipts This Page (optional)	2,966.91
TOTAL This Period (last page this line number only)	2,966.91

**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 1/21/00
<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	

SA
PREPARER

2/5/00
DATE PREPARED