

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
Dickstein Shapiro Morin & Oshinsky LLP PAC

FEC ID No. C00110197

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rachel Kronowitz 2101 L Street, NW Washington, DC 20037	DSMOLLP	05/13/99	204.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-To-Date > \$ 641.50	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Scott Gilbert 2101 L Street, NW Washington, DC 20037	DSMOLLP	05/13/99	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-To-Date > \$ 5000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Parker 2101 L Street, NW Washington, DC 20037	DSMOLLP	05/13/99	875.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-To-Date > \$ 875.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Adam Proujansky 2101 L Street, NW Washington, DC 20037	DSMOLLP	05/13/99	262.50
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-To-Date > \$ 262.50	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Shore 2101 L Street, NW Washington, DC 20037	DSMOLLP	05/13/99	875.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-To-Date > \$ 1575.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Corrine Parver 2101 L Street, NW Washington, DC 20037	DSMOLLP	05/19/99	350.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-To-Date > \$ 350.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Angelo Arcadipane 2101 L Street, NW Washington, DC 20037	DSMOLLP	05/21/99	1750.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-To-Date > \$ 1750.00	

SUBTOTAL of Receipts This Page (optional) 9316.50

TOTAL This Period (last page this line number only)