

COHEN & GRIGSBY, P. C.

ATTORNEYS AT LAW

2800 CNG Tower
625 LIBERTY AVENUE
PITTSBURGH, PENNSYLVANIA 15222-3415

TELEPHONE (412) 394-4900

FAX (412) 391-3382

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 9 12 31 PM '98

July 6, 1998

CERTIFIED MAIL

Mr. Edward Ryan
Account Specialist
Federal Elections Commission
Washington, D.C. 20463

Dear Ed:

Enclosed is our Mid-Year Political Action Committee Report (FEC Form 3X) for the period January 1, 1998 to June 30, 1998. If you have any questions about this report, please contact me at (412) 394-4954.

Sincerely,

COHEN & GRIGSBY

By: 
James F. Cingola
Treasurer

Enclosure

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 9 12 31 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) COHEN & GRIGSBY PAC	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 2900 CNB TOWER 225 LIBERTY AVE	
CITY, STATE and ZIP CODE PITTSBURGH PA 15222	
	2. FEC IDENTIFICATION NUMBER C 00195362
	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:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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>1-1-98</u> through <u>6-30-98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 23.63
(b) Cash on Hand at Beginning of Reporting Period	\$ 23.63	
(c) Total Receipts (from Line 19)	\$ 1,200.00	\$ 1,200.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 1,223.63	\$ 1,223.63
7. Total Disbursements (from Line 20)	\$ 1,200.00	\$ 1,200.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 23.63	\$ 23.63
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ ---	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ ---	

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 JAMES F. CINQUE	
Signature of Treasurer 	Date 7-8-98

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

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

(revised 1/1/91)

NAME OF COMMITTEE C o f f e e r 4 6 x 1 6 - 3 8 7 P A C		REPORT COVERING PERIOD		
		FROM 1-1-98	TO 1-30-98	
		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)	\$ 1,200.00	\$ 1,200.00		1 (a)(i)
ii. Unitemized				1 (a)(ii)
iii. Total (add i and ii) >				1 (a)(iii)
b. Political Party Committees				1 (b)
c. Other Political Committees (such as PACs)				1 (c)
d. Total Contributions (add a i, b and c) >	1,200.00	1,200.00		1 (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) >	1,200.00	1,200.00		19
20. Total Federal Receipts (subtract line 16 from line 19) >	1,200.00	1,200.00		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) >				21(c)
22. Transfers to Affiliated/Other Party Committees				22
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,200.00	1,200.00		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) >	1,200.00	1,200.00		30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	1,200.00	1,200.00		31
III. Net Contributions/Operating Expenditures				
32. Total Contributions (other than loans)(from line 11d)	1,200.00	1,200.00		32
33. Total Contribution Refunds (from line 28d)	-	-		33
34. Net Contributions (other than loans)(subtract line 33 from 32)	1,200.00	1,200.00		34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	-	-		35
36. Offsets to Operating Expenditures (from line 15)	-	-		36
37. Net Operating Expenditures (subtract line 36 from 35) >	-	-		37

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)
COHEN & GRIGSBY PAC

A. Full Name, Mailing Address and ZIP Code RICHARD R. NELSON 850 ELWATH STREET OAKMONT, PA 15139	Name of Employer COHEN & GRIGSBY, P.C.	Date (month, day, year) 2-2-98	Amount of Each Receipt this Period \$ 1,000.00
	Occupation ATTORNEY	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code LARRY K. ELLIOTT BLACKBURN ROAD SENICKLEY, PA 15143	Name of Employer COHEN & GRIGSBY, P.C.	Date (month, day, year) 4-8-98	Amount of Each Receipt this Period 200.00
	Occupation ATTORNEY	Aggregate Year-to-Date > \$ 200.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	1,200.00
TOTAL This Period (last page this line number only)	\$ 1,200.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 22

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)

COHEN & GRIGSBY PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CISERGA'S FOR ARLEN SPECTOR 411 SWEETH AVENUE, 16-015 PITTSBURGH, PA 15230-1730	PAC CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	2-20-98	\$ 1,000.00
B. Full Name, Mailing Address and ZIP Code SPIRIT OF AMERICA PAC FIFTH AVENUE PLACE PITTSBURGH, PA 15222	PAC CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-8-98	100.00
C. 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
D. 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
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

SUBTOTAL of Disbursements This Page (optional)

1,200.00

TOTAL This Period (last page this line number only)

1,200.00

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 7-6-98
<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>[Signature]</i> PREPARER	7-9-98 DATE PREPARED