

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION CIVIL ROOM

Oct 24 5 23 PM '96

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Gephardt Dinner Committee		2. FEC IDENTIFICATION NUMBER
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 607 14th Street, N.W., Suite 800		
CITY, STATE and ZIP CODE Washington, D.C. 20005		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 144)		

## 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

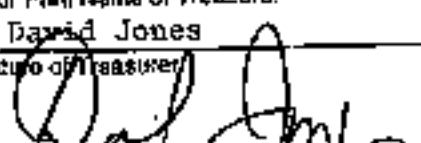
Monthly Report Due On:

- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <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  |

- Twelfth day report preceding General (Type of Election)  
 election on 11/5/96 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>10/1/96</u> through <u>10/16/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 0
(b) Cash on Hand at Beginning of Reporting Period	\$ 0	
(c) Total Receipts (from Line 19)	\$ 45,013.00	\$ 45,013.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 45,013.00	\$ 45,013.00
7. Total Disbursements (from Line 30)	\$ 11,113.00	\$ 11,113.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 33,900.00	\$ 33,900.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-8530 Local 202-218-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 1,075.48	
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 David Jones	Date Oct 24 1996
Signature of Treasurer 	

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 8/95)

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

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
	FROM	TO
Gephardt Dinner Committee	10/1/96	10/16/96
	COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	32,000.00	32,000.00
ii. Unitemized	100.00	100.00
iii. Total (add i and ii) >	32,100.00	32,100.00
b. Political Party Committees	0	0
c. Other Political Committees (such as PACs)	12,913.00	12,913.00
d. Total Contributions (add a iii, b and c) >	45,013.00	45,013.00
12. Transfers From Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0
18. Transfers from Nonfederal Account for Joint Activity	0	0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	45,013.00	45,013.00
20. Total Federal Receipts (subtract line 18 from line 19) >	45,013.00	45,013.00
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	0	0
ii. Non-Federal Share	11,113.00	11,113.00
b. Other Federal Operating Expenditures	11,113.00	11,113.00
c. Total Operating Expenditures (add a i, a ii, and b) >	0	0
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees	0	0
b. Political Party Committees	0	0
c. Other Political Committees (such as PACs)	0	0
d. Total Contribution Refunds (add a, b and c) >	0	0
29. Other Disbursements	11,113.00	11,113.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	11,113.00	11,113.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans)(from line 11d)	45,013.00	45,013.00
33. Total Contribution Refunds (from line 28d)	0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)	45,013.00	45,013.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	11,113.00	11,113.00
36. Offsets to Operating Expenditures (from line 15)	0	0
37. Net Operating Expenditures (subtract line 36 from 35) >	11,113.00	11,113.00

**SCHEDULE D**

(Revised 3/80)

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

Page 1 of 1 for  
 LINE NUMBER 10  
 (Use separate schedules for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Gephardt Dinner Committee				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor David L. Andrukitis, Inc. 50 E Street, SE Washington, DC 20003	1,075.48	0	0	1,075.48
Nature of Debt (Purpose): Printing				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				1,075.48
2) TOTALS This Period (last page in this line only)				1,075.48
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				0
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				1,075.48

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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)**  
Gephardt Dinner Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Syed N. Ahmed 700 Shadow Lane Las Vegas, NV 89106	Self-employed	10/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Heart surgeon		
	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
G. Kenneth Albrecht, Jr. 3330 E. Tropicana No. A Las Vegas, NV 89121	Allstate	10/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Insurance Broker		
	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
Robert A. Bowman 30 Hillendale Road Westport, CT 06860	ITT Corp.	10/8/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President		
	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
Peter G. Boynton 50 Innisbrook Avenue Las Vegas, NV 89113	Caesars World, Inc.	10/6/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President & CEO		
	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
Gerald Crotty Pleasantville Farm Miller Road New Vernon, NJ 07976	ITT Information Services	10/6/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Chairman & CEO		
	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
Allan Durst 102 Maytime Drive Jericho, NY 11753	ITT Corp.	10/6/96	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Tax Executive		
	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
Nicholas J. Glakas 6505 Dalroy Lane Bethesda, MD 20817	ITT Corp.	10/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Sr. Vice President		
	Aggregate Year-to-Date > \$		

**SUBTOTAL** of Receipts This Page (optional) ..... 6,250.00

**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 5  
FOR LINE NUMBER 11a1

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)**  
Gephardt Dinner Committee

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Ivan Goldsmith 1609 Hidden Springs Drive Las Vegas, NV 89117</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year) 10/11/96</p>	<p>Amount of Each Receipt This Period 1,000.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Stephen Greathouse 7140 Darby Las Vegas, NV 89117</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Alliance Gaming</p> <p>Occupation Gaming</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year) 10/11/96</p>	<p>Amount of Each Receipt This Period 1,000.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> Lennard Grodzinsky 2401 Roxbury Street Henderson, NV 89014</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Pentacore</p> <p>Occupation Civil Engineer</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year) 10/11/96</p>	<p>Amount of Each Receipt This Period 1,000.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Courtney Johnson 6638 E. Orchard Place Englewood, CO 80111</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Builder</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year) 10/11/96</p>	<p>Amount of Each Receipt This Period 1,000.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Craig H. Johnson 4795 S. Sandhill Las Vegas, NV 89120</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Builder</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year) 10/11/96</p>	<p>Amount of Each Receipt This Period 1,000.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Lisa A. Kaercher 1908 Red Robin Court Las Vegas, NV 89134</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year) 10/11/96</p>	<p>Amount of Each Receipt This Period 1,000.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Robert Lipps 404 E. 79th Street New York, NY 10071</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Bankers Trust</p> <p>Occupation Investment Banker</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year) 10/6/96</p>	<p>Amount of Each Receipt This Period 1,000.00</p>

**SUBTOTAL** of Receipts This Page (optional) ..... 7,000.00

**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 3 OF 5  
FOR LINE NUMBER 11A1

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**NAME OF COMMITTEE (In Full)**

Gephardt Dinner Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis P. Long 15 Timber Creek Sunset Hills, MO 63127  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Long & Assoc.  Occupation President Aggregate Year-to-Date > \$	10/6/96	500.00
Bruce McClellahan 6635 Oquendo Road Las Vegas, NV 89118  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self-employed  Occupation Consultant Aggregate Year-to-Date > \$	10/8/96	500.00
John W. McDonald 3240 S. Tocate Drive Las Vegas, NV 89102  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self-employed  Occupation Real estate developer Aggregate Year-to-Date > \$	10/11/96	2,000.00
Brian Menzel P.O. Box 438 Zephyr Cove, NV 89448  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Caesars Tahoe  Occupation President Aggregate Year-to-Date > \$	10/6/96	500.00
Steve Morris 2301 Palomino Lane Las Vegas, NV 89107  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Morris, Brigmone & Pickering  Occupation Attorney Aggregate Year-to-Date > \$	10/11/96	1,000.00
Sutan Parikh 2092 Sutton Way Henderson, NV 89014  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Las Vegas Cancer Cen.  Occupation Physician Aggregate Year-to-Date > \$	10/11/96	1,000.00
Ralph W. Pausig 74 Bangall Road Stamford, CT 06903  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	ITT Corp.  Occupation Executive Aggregate Year-to-Date > \$	10/6/96	1,000.00

**SUBTOTAL of Receipts This Page (optional)**

6,500.00

**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 4 OF 5  
FOR LINE NUMBER 11e1

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NAME OF COMMITTEE (In Full)  
Gephardt Dinner Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Radojevich 1201 Oaktree Lane Las Vegas, NV 89108	Pentacore Occupation: Engineer	10/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ann Reese 12 Larkspur Lane Rye, NY 10580	ITT Corp. Occupation: CFO	10/6/96	1,000.00
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
Barbara W. Saunders 1001 Trophy Hills Drive Las Vegas, NV 89128	N/A Occupation: Homemaker	10/11/96	1,000.00
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
Frank A. Schreck, Jr. 600 E. Charleston Blvd. Las Vegas, NV 89104	Schreck/Jones Occupation: Parter	10/11/96	1,000.00
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
Jerry M. Seslowe 2 Chanticleare Drive Manhasset, NY 11030	Information Requested Occupation: Information Requested	10/11/96	250.00
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
M. Frances Sponer 6142 W. Shara Avenue Las Vegas, NV 89102	Information Requested Occupation: Information Requested	10/11/96	500.00
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
Robert V. Stunkel 8225 Horsebend Lane Las Vegas, NV 89113	SES Gaming, Inc. Occupation: Real Estate	10/11/96	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) ..... 6,750.00

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: 5 OF 5  
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)  
Gephardt Dinner Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ernest M. Sussman 3150 N. Tenaya Way Las Vegas, NV 89128	Desert Urology Occupation Physician	10/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jerome F. Snyder Las Vegas, NV	Information Requested Occupation Information Requested	10/11/96	500.00
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
Mark E. Thomas 840-1 Old Road to Nine Acre Corner Concord, MA 01742	ITT Corp. Occupation VP Corp. Development	10/6/96	1,000.00
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
Paul I. Tschemia 67 Reyburn Drive Henderson, NV 89014	First Mortgage Co. Occupation Mortgage Banker	10/11/96	1,000.00
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
Elizabeth Tuttle 23 West 73rd Street New York, NY 10023	ITT Corp. Occupation Treasurer	10/6/96	1,000.00
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
Mark W. Weinberg 3904 Via Opata Falco Verdes Estates, CA 90274	Morgan Stanley Occupation VP Financial	10/11/96	1,000.00
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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

<b>SUBTOTAL</b> of Receipts This Page (optional)	5,500.00
<b>TOTAL</b> This Period (last page this line number only)	32,000.00



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 116

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**NAME OF COMMITTEE (in Full)**

Gephardt Dinner Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hotel Employees & Restaurant Employees PAC 1219 28th Street, N.W. Washington, D.C. 20007 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 2,500.00	10/11/96	2,500.00
B. Full Name, Mailing Address and ZIP Code Bally's Grand PAC P.O. Box 93698 Las Vegas, NV 89193 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 1,000.00	10/11/96	1,000.00
C. Full Name, Mailing Address and ZIP Code ITT Corp PAC 1330 Avenue of the Americas New York, NY 10019 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 5,000.00	10/6/96	5,000.00
D. Full Name, Mailing Address and ZIP Code Effective Government Committee 607 14th Street, N.W. Washington, D.C. 20005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation In-kind Travel Aggregate Year-to-Date > \$ 413.00	10/1/96	413.00
E. Full Name, Mailing Address and ZIP Code Showboat PAC 2800 E Fremont Reno, NV 89104 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 4,000.00	10/6/96	4,000.00
F. Full Name, Mailing Address and ZIP Code 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 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)

12,913.00

**TOTAL** This Period (last page this line number only)

12,913.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 21b

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)**

Gephardt Dinner Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kirtley, Breen & Assoc. Inc. 5160 S. Valley View Blvd. Las Vegas, NV 89118	Event costs-catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/96	10,700.00
B. Full Name, Mailing Address and ZIP Code United Airlines 22800 Davis Drive Sterling, VA 20164	Purpose of Disbursement In-kind Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/96	413.00
C. Full Name, Mailing Address and ZIP Code Above Disbursement paid for by Effective Government Committee 607 14th Street, NW Washington, DC 20005	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
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)

11,113.00

**TOTAL** This Period (last page this line number only)

11,113.00

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

10-24-96

First Class Mail

POSTMARKED

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

*NaN*  
PREPARER

10-25-96  
DATE PREPARED