REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)

C00297481 120798 P 276
BRUCE M CARROLL JR
CENTOCOR INC EMPLOYEE ACTION F
UND
200 GREAT VALLEY PARKWAY
MALVERN PA 19355

RECEIVED FEDERAL ELECTION COMMISSION FOR ROOM

2. FEC IDENTIFICATION NUMBER C00297481

3. [X] 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
[X] January 31 Year End Report
[ ] July 31 Mid Year Report (Non-election Year Only)
[ ] Termination Report

Monthly Report
[ ] February
[ ] March 20
[ ] April 20
[ ] May 20

orig to be filed

[ ] 12-Day Pre-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 [X] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 11/24/98 through 12/31/98		
6. (a) Cash on Hand January 1, 1998		$ 20,210.40
(b) Cash on Hand at Beginning of Reporting Period	$ 23,509.27	
(c) Total Receipts (from Line 19)	$ 1,690.07	$ 22,938.94
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 25,199.34	$ 43,149.34
7. Total Disbursements (from Line 30)	$ (485.96)	$ 17,464.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 25,685.30	$ 25,685.30
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY 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 800-424-9530
Local 202-694-1100

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: BRUCE M. CARROLL JR

Signature of Treasurer: Bruce M. Carroll Jr.

Date: 1/27/99

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

FEC FORM 3X
(revised 9/93)

FE8AN004

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

(revised 1/1/91)

NAME OF COMMITTEE CENTOCOR EMPLOYEE ACTION FUND

REPORT COVERING PERIOD FROM 11/24/98 TO: 12/31/98

	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)	1155.57	11243.44	11(a)(i)
ii. Unitemized	534.50	11695.50	11(a)(ii)
iii. Total (add i and ii) ➤	1690.07	22938.94	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	1690.07	22,938.94	11(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) ➤	1690.07	22,938.94	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	1690.07	22,938.94	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i. Federal Share			21(a)(ii)
ii. Non-Federal Share	14.04	14.04	21(b)
b. Other Federal Operating Expenditures			21(c)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			22
22. Transfers to Affiliated/Other Party Committees	(1500.00)	6500.00	23
23. Contributions to Federal Candidates/Committees and Other Political Committees			24
24. Independent Expenditures (use Schedule E)			25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26. Loan Repayments Made			27
27. Loans Made			
28. Refunds of Contributions To:			28(a)
a. Individuals/Persons Other Than Political Committees			28(b)
b. Political Party Committees			28(c)
c. Other Political Committees (such as PACs)			28(d)
d. Total Contribution Refunds (add a, b and c) ➤	1000.00	10950.00	29
29. Other Disbursements	(485.96)	17,464.04	30
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	(485.96)	17,464.04	31
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤			
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	1690.07	22,938.94	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	1690.07	22,938.94	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	14.04	14.04	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	14.04	14.04	37

FE8A/NO94

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE OF

FOR LINE NUMBER 11(a)(i)

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)
CENTOCOR EMPLOYEE ACTION FUND

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. FRED BAUER 52 CRAIG LANE FRAZER, PA 19355 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: CENTOCOR, INC. Occupation: VP, OPERATIONS Aggregate Year-to-Date > $ 260.00	BI-WEEKLY PAYROLL DEDUCTION	$30.00 ($10.00 BI-WEEKLY)
B. SALLY BOLMER 301 MELVIN ROAD PHOENIXVILLE, PA 19460 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: CENTOCOR, INC. Occupation: DIRECTOR, REGULATORY Aggregate Year-to-Date > $ 260.00	BI-WEEKLY PAYROLL DEDUCTION	$30.00 ($10.00 BI-WEEKLY)
C. JOHN BROWN 410 SANTILLO WAY DOWNINGTOWN, PA 19335 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: CENTOCOR, INC Occupation: DIRECTOR, R+D Aggregate Year-to-Date > $ 520.00	BI-WEEKLY PAYROLL DEDUCTION	$60.00 ($20.00 BI-WEEKLY)
D. MICHAEL BURCZAK 18 HIGHVIEW ROAD DOWNINGTOWN, PA 19335 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: CENTOCOR, INC Occupation: SALES Aggregate Year-to-Date > $ 610.00	9/17/98	$0.00
E. KATE CABOT 34 CRAIG LANE FRAZER, PA 19355 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: CENTOCOR, INC. Occupation: CLINICAL RESEARCH Aggregate Year-to-Date > $ 650.00	BI-WEEKLY PAYROLL DEDUCTION	$75.00 ($25.00 BI-WEEKLY)
F. DOMINIC CARUSO 1346 PENNS RIDGE PLACE DOWNINGTOWN, PA 19335 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: CENTOCOR, INC. Occupation: CFO Aggregate Year-to-Date > $ 1499.14	BI-WEEKLY PAYROLL DEDUCTION	$173.07 ($57.69 BI-WEEKLY)
G. CINDY CARY 321 SAUNDERS DRIVE WAYNE, PA 19087 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: CENTOCOR, INC. Occupation: EXEC. ASST. Aggregate Year-to-Date > $ 210.00	BI-WEEKLY PAYROLL DEDUCTION	$30.00 ($10.00 BI-WEEKLY)

SUBTOTAL of Receipts This Page (optional) $398.07

TOTAL This Period (last page this line number only) ..... —

FEEAN064

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF

FOR LINE NUMBER 11(a)(i)

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): CENTOCOR EMPLOYEE ACTION FUND

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. JAMES DANEHY, 922 SANDSTONE DRIVE, LIBERTYVILLE, IL 60048	CENTOCOR, INC. / FINANCE	BI-WEEKLY PAYROLL DEDUCTION	$30.00 ($10.00 BI-WEEKLY)
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 260.00		
B. TODD DESILVIA, 22112 SE 251 ST COURT, MAPLE VALLEY, WA 98038	CENTOCOR, INC. / SALES	9/17/98	0.00
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 225.00		
C. ERIC EVANS, 1246 MILL POND ROAD, BERNE, IN 46711	CENTOCOR, INC. / SALES	4/30/98	0.00
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 265.00		
D. GEORGE HOBBS, 206 ALAMOGAS DRIVE, WILMINGTON, DE 19803	CENTOCOR, INC. / GEN. COUNSEL	BI-WEEKLY PAYROLL DEDUCTION	$150.00 ($50.00 BI-WEEKLY)
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 1300.00		
E. DAVID HOLVECK, 138 PIQUA CIRCLE, BERWYN, PA 19312	CENTOCOR, INC. / CEO	4/30/98	0.00
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 1000.00		
F. BOB JORDAN, 905 WARRIOR ROAD, MALVERN, PA 19355	CENTOCOR, INC. / CLINICAL RESEARCH	BI-WEEKLY PAYROLL DEDUCTION	$22.50 ($7.50 BI-WEEKLY)
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 215.00		
G. KEVIN MAHER, 229 STRAWBERRY FIELD, GURNEE, IL 60031	CENTOCOR, INC. / SALES	9/17/98	0.00
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 360.00		

SUBTOTAL of Receipts This Page (optional) > 202.50

TOTAL This Period (last page this line number only) > —

FEBAN064

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF

FOR LINE NUMBER 11(a)(i)

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): CENTOCOR EMPLOYEE ACTION FUND

Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. LARRY McCLAIN, 1125 ALEXANDER LANE, WEST CHESTER, PA 19382	CENTOCOR, INC. / SCIENTIFIC AFFAIRS	BI-WEEKLY PAYROLL DEDUCTION	0.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 280.00		
B. DENISE McGINN, 131 THREE PONDS LANE, MALVERN, PA 19355	CENTOCOR, INC. / BUSINESS DEVELOPMENT	BI-WEEKLY PAYROLL DEDUCTION	$15.00 ($5.00 BI-WEEKLY)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 351.00		
C. NANCY MOYERS, 236 GRAND HARBOUR, VERMILLION, OH 44089	CENTOCOR, INC. / SALES	6/23/98	0.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 270.00		
D. DONALD NEBLOCK, 405 WOODLAND DRIVE, DOWNINGTOWN, PA 19335	CENTOCOR, INC. / RESEARCH	BI-WEEKLY PAYROLL DEDUCTION	$45.00 ($45.00 BI-WEEKLY)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 390.00		
E. TOM SCHAIBLE, 909 DOLPHIN DRIVE, MALVERN, PA 19355	CENTOCOR, INC. / CLINICAL INFORMATION	BI-WEEKLY PAYROLL DEDUCTION	$45.00 ($15.00 BI-WEEKLY)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 390.00		
F. JOSEPH SCODARI, 1624 CLAUDIA WAY, NORTH WALES, PA 19454	CENTOCOR, INC. / PRESIDENT	BI-WEEKLY PAYROLL DEDUCTION	$240.00 ($80.00 BI-WEEKLY)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 2080.00		
G. RICH SIEGEL, 367 HARSHAW DRIVE, CHESTER SPRINGS, PA 19425	CENTOCOR, INC. / RESEARCH	BI-WEEKLY PAYROLL DEDUCTION	$30.00 ($10.00 BI-WEEKLY)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 260.00		

SUBTOTAL of Receipts This Page (optional) 375.00

TOTAL This Period (last page this line number only) ..... —

FE8AN064

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE OF

FOR LINE NUMBER 11(a)(i)

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): CENTOCOR EMPLOYEE ACTION FUND

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. MADELEINE SMITH, 5029 PENN STREET, APT 6, PHILADELPHIA, PA 19124 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: CENTOCOR, INC. Occupation: FINANCE Aggregate Year-to-Date > $ 260.00	BI-WEEKLY PAYROLL DEDUCTION	$30.00 ($10.00 BI-WEEKLY)
B. ELIZABETH SOMERS, P.O. BOX 158, UNIONVILLE, PA 19375 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: CENTOCOR, INC. Occupation: MARKETING Aggregate Year-to-Date > $ 277.50	BI-WEEKLY PAYROLL DEDUCTION	0.00
C. ANN WANG, 3911 GATEHOUSE LANE, SKIPPACK, PA 19474 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: UNKNOWN Occupation: — Aggregate Year-to-Date > $ 240.00	NO LONGER CONTRIBUTES	0.00
D. HARLAN WEISMAN, 759 APPLEGATE LANE, ROSEMONT, PA 19010 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: CENTOCOR, INC. Occupation: VP, CLIN. RESEARCH Aggregate Year-to-Date > $ 1040.00	BI-WEEKLY PAYROLL DEDUCTION	$120.00 ($40.00 BI-WEEKLY)
E. PAUL WOLFING, 8 ROSE LANE, FLOURTOWN, PA 19301 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: CENTOCOR, INC. Occupation: TREASURER Aggregate Year-to-Date > $ 940.00	NO LONGER CONTRIBUTES	0.00
F. DAVE ZELINGER, 45 HOLLCK ROAD, SCHWENKSVILLE, PA 19473 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: CENTOCOR, INC Occupation: CLINICAL RESEARCH Aggregate Year-to-Date > $ 260.00	BI-WEEKLY PAYROLL DEDUCTION	$30.00 ($10.00 BI-WEEKLY)
G. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > $	Date (month, day, year):	Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) > 180.00

TOTAL This Period (last page this line number only) > 1155.57

FE8AN054

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE OF

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)
CENTOCOR EMPLOYEE ACTION FUND

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. PETE STARK RE-ELECTION COMM. P.O. BOX 75214 WASHINGTON, DC 20013-5214	SEE 7/15/98 REPORT CHECK NEVER CASHED	5/1/98 (CHECK DATE)	($500.00)
B. WELDON FOR CONGRESS COMM. P.O. BOX 1992 MEDIA, PA 19063	SEE 7/15/98 REPORT CHECK NEVER CASHED	5/1/98 (CHECK DATE)	($1,000.00)
C.			
D.			
E.			
F.			
G.			
H.			
I.			

SUBTOTAL of Disbursements This Page (optional) ($1,500.00)

TOTAL This Period (last page this line number only) ($1,500.00)

FEBANO04

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF

FOR LINE NUMBER 29

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)

CENTOCOR EMPLOYEE ACTION FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SAM KATZ FOR MAYOR 225 S. 15TH STREET, SUITE 2800 PHILADELPHIA, PA 19103	SAM KATZ - PHILADELPHIA MAYORAL CANDIDATE Disbursement for: [X] Primary [ ] General [ ] Other (specify)	12/8/98	$1000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	$1000.00
TOTAL This Period (last page this line number only)	$1000.00

FEBA/004

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 1/28/99	Date of Receipt
☐	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
☐	Electronic Filing	

JM	1/28/99
PREPARER	DATE PREPARED

(4/98)