

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) GATX Good Government Program		2000 MAR 28 A 9:03
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 500 W. Monroe St.		
CITY, STATE and ZIP CODE Chicago, IL 60661-3676		
2. FEC IDENTIFICATION NUMBER C 00118703		
3. <input checked="" type="checkbox"/> This committee has qualified as a municipal candidate committee. (see FEC FORM 1M1)		

## 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 Primary  
(Type of Election)  
election on April 4 in the State of Pennsylvania

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>1-1-2000</u> through <u>3-15-2000</u>		
6. (a) Cash on Hand January 1, <del>19</del> <u>2000</u>			\$ 51,231.79
(b) Cash on Hand at Beginning of Reporting Period		\$ 51,231.79	
(c) Total Receipts (from Line 1B)		\$ 125.08	\$ 125.08
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 51,356.87	\$ 51,356.87
7. Total Disbursements (from Line 3C)		\$ 710.72	\$ 710.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 50,646.15	\$ 50,646.15
9. Debts and Obligations Owed TO the Committee (Itemize as on Schedule C and/or Schedule D)		\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize as on Schedule C and/or Schedule D)		\$ 0	
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 Brian A. Kenney	Date 3-17-00
Signature of Treasurer <i>Brian Kenney</i>	

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 11/81)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
		FROM: 1-1-2000	TO: 3-15-2000	
		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) .....	0	0	11(a)
ii.	Unitemized .....	0	0	11(b)
iii.	Total ..... (add i and ii) >	0	0	11(c)
b.	Political Party Committees .....	0	0	11(d)
c.	Other Political Committees (such as PACs) .....	0	0	11(e)
d.	Total Contributions ..... (add a ii, b and c) >	0	0	11(f)
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.) .....	125.08	125.08	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) >	125.08	125.08	19
20.	Total Federal Receipts ..... (subtract line 18 from line 19) >	125.08	125.08	20
<b>II. Disbursements</b>				
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	0	21(c)
c.	Total Operating Expenditures ..... (add a i, a ii, and b) >	0	0	21(d)
22.	Transfers to Affiliated/Other Party Committees .....	0	0	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees .....	500.00	500.00	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.	Individuals/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 .....	210.72	210.72	29
30.	Total Disbursements ..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	710.72	710.72	30
31.	Total Federal Disbursements ..... (subtract line 21 a ii from line 30) >	710.72	710.72	31
<b>III. Net Contributions/Operating Expenditures</b>				
32.	Total Contributions (other than loans)(from line 11d) .....	0	0	32
33.	Total Contribution Refunds (from line 28d) .....	0	0	33
34.	Net Contributions (other than loans)(subtract line 33 from 32) .....	0	0	34
35.	Total Federal Operating Expenditures ..... (add 21 a i and 21 b) >	0	0	35
36.	Offsets to Operating Expenditures (from line 15) .....	0	0	36
37.	Net Operating Expenditures ..... (subtract line 36 from 35) >	0	0	37

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) 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)**

GATX Good Government Program

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Congressman John Murtha P.O. Box 1091 Johnstown, PA 15907	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2-16-00	500.00
B. 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
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) ..... 500.00

**TOTAL** This Period (last page this line number only) ..... 500.00

