

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 87 / 808

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bob Casey for Pennsylvania Committee

A. Full Name (Last, First, Middle Initial) John J. Joyce Mailing Address 9 North Main St City Pittston State PA Zip Code 18941 FEC ID number of contributing federal political committee. C Name of Employer John J Joyce Insurance Occupation Insurance Executive Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Date of Receipt M M D D Y Y Y Y 12 31 2005 Transaction ID: C1276341 Amount of Each Receipt this Period 500.00 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
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B. Full Name (Last, First, Middle Initial) William J. Leonard Mailing Address 929 Valley Rd. City Blue Bell State PA Zip Code 19122-1921 FEC ID number of contributing federal political committee. C Name of Employer Obermayer, Rebmann, Maxwell and Hippel Occupation Attorney Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Date of Receipt M M D D Y Y Y Y 12 31 2005 Transaction ID: C1276351 Amount of Each Receipt this Period 2100.00 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
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C. Full Name (Last, First, Middle Initial) Edward P. McNale, Esq. Mailing Address 21 East Broad Street City Hazleton State PA Zip Code 18201-6520 FEC ID number of contributing federal political committee. C Name of Employer Self Employed Occupation Attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Date of Receipt M M D D Y Y Y Y 12 31 2005 Transaction ID: C1276361 Amount of Each Receipt this Period 1000.00 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
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SUBTOTAL of Receipts This Page (optional) 3500.00

TOTAL This Period (last page this line number only)

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