

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1. NAME OF COMMITTEE (in full) FRIENDS OF CONGRESSMAN TIM HOLDEN		2. FEC IDENTIFICATION NUMBER 23 CO265322
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. P.O. BOX 37		
CITY, STATE and ZIP CODE SAINT CLAIR, PA 179700037	STATE/DISTRICT PA 6	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

<input checked="" type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding _____ (Type of Election)
<input type="checkbox"/> July 15 Quarterly Report	election on _____ in the State of _____
<input type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election on _____
<input type="checkbox"/> January 31 Year End Report	_____ in the State of _____
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-date
5. Covering Period 01/01/2000 through 03/31/2000		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	\$101935.00	\$101935.00
(b) Total Contribution Refunds (From Line 20(d))	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$101935.00	\$101935.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$47339.20	\$47339.20
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$0.00
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	\$47339.20	\$47339.20
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$166953.67	
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$0.00	

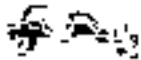
For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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 THOMAS V. NAWROCKI	Date 04/03/00
Signature of Treasurer <i>Thomas V. Nawrocki</i>	

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

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Detailed Summary Page

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) FRIENDS OF CONGRESSMAN TIM HOLDEN	Report Covering the Period:	
	From: 01/01/2000	To: 03/31/2000

	Column A Total This Period	Column B Calendar Year-To-Date
I. RECEIPTS		
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	\$21055.00	
(ii) Unitemized	\$34770.00	
(iii) Total of contributions from individual	\$55825.00	\$55825.00
(b) Political Party Committees	\$880.00	\$880.00
(c) Other Political Committees (such as PACs)	\$45450.00	\$45450.00
(d) The Candidate	\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(i), (b), (c) and (d))	\$101935.00	\$101935.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) All Other Loans	\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))	\$0.00	\$0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	\$0.00	\$0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	\$222.51	\$222.51
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	\$102157.51	\$102157.51
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	\$47339.20	\$47339.20
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) Of All Other Loans	\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	\$0.00	\$0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	\$0.00	\$0.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	\$0.00	\$0.00
21. OTHER DISBURSEMENTS	\$25025.80	\$25025.80
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	\$72365.00	\$72365.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$137161.18
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$102157.51
25. SUBTOTAL (add Line 23 and Line 24)	\$239318.67
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$72365.00
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$166953.67

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the detailed summary page	PAGE	OF
	1	10
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)
FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce H. Andrews 1133 Connecticut Avenue NW Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Quinn Gillespie & Associates Occupation consultant	03/16/2000	\$250.00
Aggregate Year-to-Date ->		\$250.00	
John P. Bane 2428 Pine Street Ashland, PA 17921- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Bane Insurance Agency Occupation owner	02/28/2000	\$100.00
Aggregate Year-to-Date ->		\$100.00	
John P. Bane 2428 Pine Street Ashland, PA 17921- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Bane Insurance Agency Occupation owner	03/16/2000	\$175.00
Aggregate Year-to-Date ->		\$275.00	
Margaret Baranko 13 North Lincoln Street P.O. Box 70 Mc Adoo, PA 18237-2219 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Self Occupation Insurance Agent	03/08/2000	\$40.00
Aggregate Year-to-Date ->		\$40.00	
Margaret Baranko 13 North Lincoln Street P.O. Box 70 Mc Adoo, PA 18237-2219 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Self Occupation Insurance Agent	03/28/2000	\$175.00
Aggregate Year-to-Date ->		\$215.00	
Frederick M. Bissecker 127 Fairview Street Boyertown, PA 19512-1803 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Drug, Plastics and Glass Co. Occupation CEO	03/28/2000	\$300.00
Aggregate Year-to-Date ->		\$300.00	
Albert R. Boscov 70 Devon Drive Reading, PA 19606- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Boscov's Dept. Stores Occupation C.E.O.	03/16/2000	\$750.00
Aggregate Year-to-Date ->		\$750.00	

SUBTOTAL of Receipts This Page (optional)	\$1790.00
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 10
FOR LINE NUMBER 11(a) (i)

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NAME OF COMMITTEE (IN FULL)
FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles A. Bressi, Jr., Esq. 510 Mahantongo Street Pottsville, PA 17901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Self Occupation Attorney	03/02/2000	\$100.00
Aggregate Year-to-Date ->		\$100.00	
Charles A. Bressi, Jr., Esq. 510 Mahantongo Street Pottsville, PA 17901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Self Occupation Attorney	03/28/2000	\$175.00
Aggregate Year-to-Date ->		\$275.00	
Ernest J. Choquette, Esq. 1948 Wickford Pl. Wyomissing, PA 19610- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Stevens & Lee Occupation Attorney	03/16/2000	\$250.00
Aggregate Year-to-Date ->		\$250.00	
William H. Combs III 1154 Reading Boulevard Wyomissing, PA 19610- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Tamaqua Cable Products Corp. Occupation Sales	03/17/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
Sandra Coyle 106 Arlene Street Minersville, PA 17954- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	None Occupation housewife	03/08/2000	\$40.00
Aggregate Year-to-Date ->		\$40.00	
Sandra Coyle 106 Arlene Street Minersville, PA 17954- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	None Occupation housewife	03/31/2000	\$175.00
Aggregate Year-to-Date ->		\$215.00	
Emmanuel H. Dimitriou, Esquire 522-24 Court Street Reading, PA 19603- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Self Occupation Attorney	02/28/2000	\$50.00
Aggregate Year-to-Date ->		\$50.00	

SUBTOTAL of Receipts This Page (optional)	\$1290.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (IN FULL)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Emmanuel H. Dimitriou, Esquire 522-24 Court Street Reading, PA 19603- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Self Occupation Attorney	03/16/2000	\$300.00
Aggregate Year-to-Date ->		\$350.00	
B. Full Name, Mailing Address and Zip Code John V. Dugan, Jr. 8301 Miss Anne Ln. Annandale, VA 22003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Lockheed Martin Occupation Federal Affairs Representative	01/28/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
C. Full Name, Mailing Address and Zip Code Lynn A. Field 445 Ruff Road Dley, PA 19547- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	None Occupation housewife	03/28/2000	\$300.00
Aggregate Year-to-Date ->		\$300.00	
D. Full Name, Mailing Address and Zip Code Daniel B. Fleming 6400 Crayford Street Burke, VA 22015- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Paul Magliocchetti Asso. inc. Occupation Legislative Counsel	03/16/2000	\$250.00
Aggregate Year-to-Date ->		\$250.00	
E. Full Name, Mailing Address and Zip Code Joseph A. Frank 17 Fordham Road Wilkes Barre, PA 18702- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Centralia Coal Sales Company Occupation Chairman / CEO	03/28/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
F. Full Name, Mailing Address and Zip Code Marc A. Fruchter 77 Granite Street Mohnton, PA 19540-2110 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Marc Fruchter Aviation Occupation Pilot/Owner	03/16/2000	\$500.00
Aggregate Year-to-Date ->		\$600.00	
G. Full Name, Mailing Address and Zip Code Michael F. Geissler 118 Deborah Drive Wyomissing, PA 19610- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	All-Star Beer Distributor Occupation co-owner	03/16/2000	\$600.00
Aggregate Year-to-Date ->		\$600.00	

SUBTOTAL of Receipts This Page (optional)	\$3050.00
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

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FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James A. Goodman 201 West Pine Street Mahanoy City, PA 17948- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	California Wine Institute Occupation Gov't Relations	03/02/2000	\$40.00
		Aggregate Year-to-Date ->	\$40.00
James A. Goodman 201 West Pine Street Mahanoy City, PA 17948- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	California Wine Institute Occupation Gov't Relations	03/28/2000	\$175.00
		Aggregate Year-to-Date ->	\$215.00
Rosemary M. Gulati 305 Karrwood Drive Wayne, PA 19087- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	None Occupation housewife	03/17/2000	\$1000.00
		Aggregate Year-to-Date ->	\$1000.00
Victor H. Hammel 607 Trent Avenue Wyomissing, PA 19610- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	J.C. Ehrlich Co., Inc. Occupation President	03/28/2000	\$500.00
		Aggregate Year-to-Date ->	\$500.00
Joseph M. Harenza, Esquire 4 High Road Wyomissing, PA 19610- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Self Occupation Attorney	03/16/2000	\$250.00
		Aggregate Year-to-Date ->	\$250.00
Roy Heim 131 Pottsville Street Cressona, PA 17929- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Heim Construction Occupation owner	03/28/2000	\$350.00
		Aggregate Year-to-Date ->	\$350.00
John H. Henninger, III 229 North 5th Street Reading, PA 19601- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Henninger Funeral Home Occupation Director	03/29/2000	\$225.00
		Aggregate Year-to-Date ->	\$225.00

SUBTOTAL of Receipts This Page (optional)

\$2540.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (IN FULL)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Genevieve S. Hracho 727 Washington Street Reading, PA 19601-	None Occupation housewife	03/16/2000	\$375.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$375.00
B. Full Name, Mailing Address and Zip Code Walter F. Jones 1956 3rd Avenue Pottsville, PA 17901-	None Occupation Retired	02/28/2000	\$40.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$40.00
C. Full Name, Mailing Address and Zip Code Walter F. Jones 1956 3rd Avenue Pottsville, PA 17901-	None Occupation Retired	03/17/2000	\$175.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$215.00
D. Full Name, Mailing Address and Zip Code Larry E. Kehl Route 4, Box 4050 Fleetwood, PA 19522-	Self Occupation Farmer	03/16/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$500.00
E. Full Name, Mailing Address and Zip Code Sidney D. Kline P.O. Box 579 Reading, PA 19603-	Stevens & Lee Occupation Lawyer	03/16/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$250.00
F. Full Name, Mailing Address and Zip Code John P. Kweder, Jr. R.R. #1, Box 98 Nesquehoning, PA 18240-	Alfred Benesch & Co. Occupation Professional Engineer	03/02/2000	\$40.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$40.00
G. Full Name, Mailing Address and Zip Code John P. Kweder, Jr. R.R. #1, Box 98 Nesquehoning, PA 18240-	Alfred Benesch & Co. Occupation Professional Engineer	03/17/2000	\$175.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$215.00

SUBTOTAL of Receipts This Page (optional)	\$1555.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (IN FULL)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code Nancy K. Magliocchetti 10203 Woodvale Pond Drive Fairfax Station, VA 22039- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Paul Magliocchetti & Assoc. Occupation Receptionist Date (Month, day, year) 03/16/2000 Amount of each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
B. Full Name, Mailing Address and Zip Code Paul J. Magliocchetti 10203 Woodvale Pond Drive Fairfax Station, VA 22039-1658 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Paul Magliocchetti & Associates Occupation Associate Date (Month, day, year) 03/16/2000 Amount of each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
C. Full Name, Mailing Address and Zip Code John W. McGoff 1013 East 10th Street Berwick, PA 18603- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Consolidated Cigar Co. Occupation V.P. Mfg. Date (Month, day, year) 02/28/2000 Amount of each Receipt this Period \$40.00 Aggregate Year-to-Date -> \$40.00
D. Full Name, Mailing Address and Zip Code John W. McGoff 1013 East 10th Street Berwick, PA 18603- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Consolidated Cigar Co. Occupation V.P. Mfg. Date (Month, day, year) 03/17/2000 Amount of each Receipt this Period \$240.00 Aggregate Year-to-Date -> \$240.00
E. Full Name, Mailing Address and Zip Code Dr. Arthur H. McTighe 67 Fay Lane Lewisburg, PA 17837- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Occupation Doctor Date (Month, day, year) 03/28/2000 Amount of each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
F. Full Name, Mailing Address and Zip Code Fred Miller 1415 Pottsville Street Pottsville, PA 17901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Miller Distributing Occupation owner Date (Month, day, year) 02/28/2000 Amount of each Receipt this Period \$40.00 Aggregate Year-to-Date -> \$40.00
G. Full Name, Mailing Address and Zip Code Fred Miller 1415 Pottsville Street Pottsville, PA 17901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Miller Distributing Occupation owner Date (Month, day, year) 03/16/2000 Amount of each Receipt this Period \$175.00 Aggregate Year-to-Date -> \$215.00

SUBTOTAL of Receipts This Page (optional)	\$1205.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (IN FULL)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of each Receipt this Period
Frances Nagle R.R. 1, Box 1594 Orwigsburg, PA 17961-9656	None	03/31/2000	\$350.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation housewife		Aggregate Year-to-Date -> \$350.00
John Nawrocki 909 E Market Street Danville, PA 17821-	None	03/28/2000	\$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired		Aggregate Year-to-Date -> \$300.00
Robert S. Nestor 200 Broad Street Ashland, PA 17921-	Self	02/28/2000	\$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Pharmacist		Aggregate Year-to-Date -> \$50.00
Robert S. Nestor 200 Broad Street Ashland, PA 17921-	Self	03/28/2000	\$175.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Pharmacist		Aggregate Year-to-Date -> \$225.00
Michael J. OConnor PO BOX 201 Frackville, PA 17931-	Self	02/28/2000	\$40.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Attorney		Aggregate Year-to-Date -> \$40.00
Michael J. OConnor PO BOX 201 Frackville, PA 17931-	Self	03/17/2000	\$175.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Attorney		Aggregate Year-to-Date -> \$215.00
John Ptazzkowski 227 Florida Shenandoah, PA 17976-	None	01/28/2000	\$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired		Aggregate Year-to-Date -> \$200.00

SUBTOTAL of Receipts This Page (optional)	\$1290.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (IN FULL)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Ptasskowski 227 Florida Shenandoah, PA 17976-	None	02/28/2000	\$40.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired		
	Aggregate Year-to-Date ->	\$240.00	
Michael Pullano 3312 Earl St. Laureldale, PA 19605-	Pike Cafe	03/28/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation owner		
	Aggregate Year-to-Date ->	\$500.00	
Brian R. Rich R.R. #2, Box 2169A Orwigsburg, PA 17961-	Sch Energy Resources	03/28/2000	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Vice President		
	Aggregate Year-to-Date ->	\$1000.00	
John N. Rich Reading Anthracite 200 Mahantongo Street Pottsville, PA 17901-	Reading Anthracite Co.	03/27/2000	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Chairman of the Board		
	Aggregate Year-to-Date ->	\$1000.00	
John W. Rich, Jr. RD #1 Box 211 Auburn, PA 17922-	Reading Anthracite Co.	03/27/2000	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation President		
	Aggregate Year-to-Date ->	\$1000.00	
David F. Rick 215 East Broad Street Shillington, PA 19607-	Tulpehocken Ltd.	03/17/2000	\$600.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation General Manager		
	Aggregate Year-to-Date ->	\$600.00	
Philip D. Rowe, Jr. P.O. Box 6387 Wyomissing, PA 19610-	Dempsey's	03/28/2000	\$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation owner		
	Aggregate Year-to-Date ->	\$300.00	

SUBTOTAL of Receipts This Page (optional)	\$4440.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (IN FULL)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of Each Receipt this Period
Michael A. Setley, Esquire 15 Widgeon Drive Denver, PA 17517-	Self Occupation Attorney	03/16/2000	\$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$300.00	
B. Full Name, Mailing Address and Zip Code Irene Snyder 3026 Birch Street Whitehall, PA 18052-	None Occupation housewife	03/28/2000	\$600.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$600.00	
C. Full Name, Mailing Address and Zip Code Thomas M. Sosar, R.P.T. 649 South Garfield Avenue Frackville, PA 17931-	Self Occupation Physical Therapy	03/03/2000	\$40.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$40.00	
D. Full Name, Mailing Address and Zip Code Thomas M. Sosar, R.P.T. 649 South Garfield Avenue Frackville, PA 17931-	Self Occupation Physical Therapy	03/17/2000	\$175.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$215.00	
E. Full Name, Mailing Address and Zip Code Richard C. Stabingas 163 Avenue D Schuylkill Haven, PA 17972-	Self Occupation Funeral Director	03/02/2000	\$40.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$40.00	
F. Full Name, Mailing Address and Zip Code Richard C. Stabingas 163 Avenue D Schuylkill Haven, PA 17972-	Self Occupation Funeral Director	03/28/2000	\$175.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$215.00	
G. Full Name, Mailing Address and Zip Code Craig Stein 109 Jem Drive Ambler, PA 19002-	Reading Phillies Occupation President	03/16/2000	\$750.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$750.00	

SUBTOTAL of Receipts This Page (optional)	\$2080.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (IN FULL)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of Each Receipt this Period
Ash Sudhakar, Esquire 26 Eagle Lane Reading, PA 19607-3303 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Sudhakar Engineering Occupation: President Aggregate Year-to-Date ->	03/24/2000	\$500.00
B. Full Name, Mailing Address and Zip Code Richard Thornburg, Esq. P.O. Box 1280 Pottsville, PA 17901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Self Occupation: Attorney Aggregate Year-to-Date ->	03/02/2000	\$40.00
C. Full Name, Mailing Address and Zip Code Richard Thornburg, Esq. P.O. Box 1280 Pottsville, PA 17901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Self Occupation: Attorney Aggregate Year-to-Date ->	03/28/2000	\$175.00
D. Full Name, Mailing Address and Zip Code Mark M. Waclawski 1755 Jefferson Davis Highway Arlington, VA 22202- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PMA Occupation: Associate Aggregate Year-to-Date ->	03/16/2000	\$250.00
E. Full Name, Mailing Address and Zip Code James G. Yost 112 Brookside Street Watsontown, PA 17777- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Commonwealth of Pennsylvania Occupation: Insurance Fund Investigator Aggregate Year-to-Date ->	03/02/2000	\$50.00
F. Full Name, Mailing Address and Zip Code James G. Yost 112 Brookside Street Watsontown, PA 17777- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Commonwealth of Pennsylvania Occupation: Insurance Fund Investigator Aggregate Year-to-Date ->	03/28/2000	\$300.00
G. Full Name, Mailing Address and Zip Code William Zimmerman, Esq. 111 East Market Street Pottsville, PA 17901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Self Occupation: Attorney Aggregate Year-to-Date ->	03/28/2000	\$500.00

SUBTOTAL of Receipts This Page (optional)	\$1815.00
TOTAL This Period (last page this line number only)	\$21055.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (IN FULL)
FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fourteenth Ward Association 324 Robeson Street Reading, PA 19601-		03/16/2000	\$450.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$450.00	
B. Full Name, Mailing Address and Zip Code (Comm. to Re-Elect Keith McCall) 336 West Ludlow Street Summit Hill, PA 18250-		03/09/2000	\$60.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$60.00	
C. Full Name, Mailing Address and Zip Code Citizens for Randy Pyle P.O. Box 15013 Reading, PA 19612-		03/28/2000	\$150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$150.00	
D. 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 ->		
E. 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 ->		
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)	\$660.00
TOTAL This Period (last page this line number only)	\$660.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (IN FULL)
FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CMAPAC Chemical Manu Assoc 1300 Wilson Blvd Arlington, VA 22209- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	03/24/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
NMJ P. L.O.W. 1150 17th Street NW Suite 700 Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	03/16/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
Dealers Election Action Committee 8400 Westpark Drive Mc Lean, VA 22102- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	03/16/2000	\$3500.00
Aggregate Year-to-Date ->		\$3500.00	
United Mine Workers America 8315 Lee Highway Fairfax, VA 22031-2215 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	03/27/2000	\$1500.00
Aggregate Year-to-Date ->		\$1500.00	
Attached North America PAC 1112 Lincoln Road Birdsboro, PA 19508- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	03/23/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
American Medical PAC ATTN: Margaret L. Webber 1101 Vermont Avenue, N.W. Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	03/20/2000	\$2500.00
Aggregate Year-to-Date ->		\$2500.00	
United Egg Association EGGPAC 1303 Hightower Trail Suite 200 Atlanta, GA 30350- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	03/16/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	

SUBTOTAL of Receipts This Page (optional)	\$9500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (IN FULL)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of each Receipt this Period
American Hospital Association PAC 325 Seventh Street NW Washington, DC 20004- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/27/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
B. Full Name, Mailing Address and Zip Code American Optometric Association PAC 1505 Prince Street Suite 300 Alexandria, VA 22314- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/22/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
C. Full Name, Mailing Address and Zip Code National Education Association PAC 1201 16th Street, NW Suite 421 Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/09/2000	\$1500.00
Aggregate Year-to-Date ->		\$1500.00	
D. Full Name, Mailing Address and Zip Code Assoc. of Flight Attendants PAC 1275 K Street NW 5th Floor Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/13/2000	\$250.00
Aggregate Year-to-Date ->		\$250.00	
E. Full Name, Mailing Address and Zip Code PAC of PA Blue Cross Plans P.O. Box 10512 Harrisburg, PA 17105- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/02/2000	\$100.00
Aggregate Year-to-Date ->		\$100.00	
F. Full Name, Mailing Address and Zip Code JAW V CAP 8000 East Jefferson Avenue Detroit, MI 48214-3963 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/16/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
G. Full Name, Mailing Address and Zip Code JAW V CAP 8000 East Jefferson Avenue Detroit, MI 48214-3963 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/30/2000	\$1500.00
Aggregate Year-to-Date ->		\$2000.00	

SUBTOTAL of Receipts This Page (optional)	\$4850.00
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	OF
	3	9
FOR LINE NUMBER		
11(c)		

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NAME OF COMMITTEE (IN FULL)
FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of Each Receipt this Period
Florida Sugar Cane League PAC 115 South Lopez Street Clewiston, FL 33440-		03/24/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$500.00
B. Full Name, Mailing Address and Zip Code Natl Air Traffic Contr Assoc. 1150 17th Street, NW Suite 701 Washington, DC 20036-		03/16/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$500.00
C. Full Name, Mailing Address and Zip Code Minn-Dak Farmers Cooperative PAC 7525 Red River Road Wahpeton, ND 58075-		03/24/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$500.00
D. Full Name, Mailing Address and Zip Code American Sugarbeet Growers Assoc. PAC 1156 15th Street, N.W. Suite 1101 Washington, DC 20005-		03/16/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$500.00
E. Full Name, Mailing Address and Zip Code American Speech-Language-Hearing Association PAC 10601 Rockville Pike Rockville, MD 20852-		03/31/2000	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$1000.00
F. Full Name, Mailing Address and Zip Code Local 743 IBEW 241 South Fifth Street Reading, PA 19602-		03/03/2000	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$100.00
G. Full Name, Mailing Address and Zip Code Nat. Assoc. of Insurance & Financial 1922 F Street NW Washington, DC 20006-		03/09/2000	\$1500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$1500.00

SUBTOTAL of Receipts This Page (optional)	\$4600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (IN FULL)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

<p>A. Full Name, Mailing Address and Zip Code EA Credit Union League 4309 N Front Street Harrisburg, PA 17110-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$150.00</p>	<p>Date (month, day, year) 03/28/2000</p>	<p>Amount of each Receipt this Period \$150.00</p>
<p>B. Full Name, Mailing Address and Zip Code AICPA Effective Legislation Committee 1455 Pennsylvania Avenue NW Washington, DC 20004-1081</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 03/28/2000</p>	<p>Amount of each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code American Council of Life Insurance PAC Attn: Timothy J. Keating Washington, DC 20004-2599</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 03/13/2000</p>	<p>Amount of each Receipt this Period \$1000.00</p>
<p>D. Full Name, Mailing Address and Zip Code IBEW Local 743 32 Morgantown Road Reading, PA 19611-1650</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$300.00</p>	<p>Date (month, day, year) 03/16/2000</p>	<p>Amount of each Receipt this Period \$300.00</p>
<p>E. Full Name, Mailing Address and Zip Code Ironworkers Local Union 420 1645 Fairview Street Reading, PA 19606-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Date (month, day, year) 02/28/2000</p>	<p>Amount of each Receipt this Period \$100.00</p>
<p>F. Full Name, Mailing Address and Zip Code Ironworkers Local Union 420 1645 Fairview Street Reading, PA 19606-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$275.00</p>	<p>Date (month, day, year) 03/16/2000</p>	<p>Amount of each Receipt this Period \$175.00</p>
<p>G. Full Name, Mailing Address and Zip Code Brotherhood of Locomotive Engineers 1370 Ontario Street Cleveland, OH 44113-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 03/22/2000</p>	<p>Amount of each Receipt this Period \$500.00</p>

SUBTOTAL of Receipts This Page (optional)	\$2725.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dairy Farmers Of America DEPAC P.O. Box 909700 Kansas City, MO 64190-9700 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/16/2000	\$1000.00
Aggregate Year-to-Date ->		\$1000.00	
B. Full Name, Mailing Address and Zip Code United Steel Workers of America 5 Gateway Center Pittsburgh, PA 15222- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/09/2000	\$100.00
Aggregate Year-to-Date ->		\$100.00	
C. Full Name, Mailing Address and Zip Code American Maritime Officers, AFL-CIO 652 Fourth Avenue Brooklyn, NY 11232- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/16/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
D. Full Name, Mailing Address and Zip Code International Union of Operating 1125 Seventeenth Street NW Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/08/2000	\$200.00
Aggregate Year-to-Date ->		\$200.00	
E. Full Name, Mailing Address and Zip Code Bell Atlantic PAC 1717 Arch Street Philadelphia, PA 19103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/16/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
F. Full Name, Mailing Address and Zip Code Paul Magliocchetti Associates PMA PAC 1755 Jefferson Davis HWY., STE. 1107 Arlington, VA 22202- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/16/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
G. Full Name, Mailing Address and Zip Code Wholesale/Distributor PAC 1725 K Street NW Washington, DC 20006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/13/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	

SUBTOTAL of Receipts This Page (optional)	\$3300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in full)

FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of each Receipt this Period
PASS PAC 1150 17th Street NW Suite 702 Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/16/2000	\$500.00
		Aggregate Year-to-Date ->	\$500.00
B. Full Name, Mailing Address and Zip Code PP&L PAC Two North Ninth Street Allentown, PA 18101- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/24/2000	\$1000.00
		Aggregate Year-to-Date ->	\$1000.00
C. Full Name, Mailing Address and Zip Code Manufactured Housing Political Action Co 2101 Wilson Boulevard Suite 610 Arlington, VA 22201-3062 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/09/2000	\$500.00
		Aggregate Year-to-Date ->	\$500.00
D. Full Name, Mailing Address and Zip Code Laborers' Political League 905 16th Street, NW Washington, DC 20006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		01/10/2000	\$1000.00
		Aggregate Year-to-Date ->	\$1000.00
E. Full Name, Mailing Address and Zip Code Laborers' Political League 905 16th Street, NW Washington, DC 20006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/09/2000	\$1500.00
		Aggregate Year-to-Date ->	\$2500.00
F. Full Name, Mailing Address and Zip Code Maint of Way Political League 26555 Evergreen Road Suite 200 Southfield, MI 48076-4225 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/16/2000	\$500.00
		Aggregate Year-to-Date ->	\$500.00
G. Full Name, Mailing Address and Zip Code Responsible Citizens Political League 3 Research Place Rockville, MD 20850- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/16/2000	\$500.00
		Aggregate Year-to-Date ->	\$500.00

SUBTOTAL of Receipts This Page (optional)

\$5500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nat. Assoc. of Postal Supervisors 44 c/o Luther J Long 2232 Downing Road Reading, PA 19605- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/29/2000	\$500.00
		Aggregate Year-to-Date ->	\$500.00
B. Full Name, Mailing Address and Zip Code National Milk Producers Fed PAC 2101 Wilson Blvd Suite 400 Arlington, VA 22201- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/16/2000	\$500.00
		Aggregate Year-to-Date ->	\$500.00
C. Full Name, Mailing Address and Zip Code Realtors PAC 430 North Michigan Avenue Chicago, IL 60611- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/31/2000	\$1500.00
		Aggregate Year-to-Date ->	\$1500.00
D. Full Name, Mailing Address and Zip Code Realtors PAC 430 North Michigan Avenue Chicago, IL 60611- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/31/2000	\$975.00
		Aggregate Year-to-Date ->	\$2475.00
E. Full Name, Mailing Address and Zip Code Rohm and Haas PAC Independence Mall West Philadelphia, PA 19105- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/31/2000	\$500.00
		Aggregate Year-to-Date ->	\$500.00
F. Full Name, Mailing Address and Zip Code United Parcel Service PAC 55 Glenlake Parkway, N.E. Atlanta, GA 30328- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/09/2000	\$1000.00
		Aggregate Year-to-Date ->	\$1000.00
G. Full Name, Mailing Address and Zip Code Nat'l Comm. to Preserve Social Security 10 G Street NE Suite 600 Washington, DC 20006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/09/2000	\$500.00
		Aggregate Year-to-Date ->	\$500.00

SUBTOTAL of Receipts This Page (optional)	\$5475.00
TOTAL This Period (last page this line number only)	

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)
FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of each Receipt this Period
United Association Plumbers Pipefitters & Steamfitters Local 524 Attn: Jack Greenwood Scranton, PA 18505- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/16/2000	\$275.00
Aggregate Year-to-Date ->		\$275.00	
B. Full Name, Mailing Address and Zip Code Southern Minnesota Sugar Coop. PAC P.O. Box 500 Roxville, MN 56284- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/16/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
C. Full Name, Mailing Address and Zip Code Lucent Technologies PAC 900 19th Street NW Suite 700 Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/24/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
D. Full Name, Mailing Address and Zip Code U.A. Local 524 711 Corey Street Scranton, PA 18505- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/09/2000	\$2000.00
Aggregate Year-to-Date ->		\$2000.00	
E. Full Name, Mailing Address and Zip Code BAK Systems USA PAC 1215 Jefferson Davis Highway Suite 1500 Arlington, VA 22202- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/22/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
F. Full Name, Mailing Address and Zip Code Forry, Ullman, Ullman & Forry PAC 850 North Park Road Wyomissing, PA 19610- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/28/2000	\$75.00
Aggregate Year-to-Date ->		\$75.00	
G. Full Name, Mailing Address and Zip Code Plumbers Local Union PAC Att: Mr. Edward Keenan 2791 South Hampton Street Philadelphia, PA 19154- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		03/28/2000	\$1000.00
Aggregate Year-to-Date ->		\$1000.00	

SUBTOTAL of Receipts This Page (optional)	\$4850.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (in full)
FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Beer Wholesalers Assoc. PAC 1101 S. Washington Street Alexandria, VA 22314-4494		03/28/2000	\$3500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	\$3500.00
B. Full Name, Mailing Address and Zip Code YEI PAC Attn: Bruce Smith 645 Penn. Street Reading, PA 19612-4145		03/28/2000	\$150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	\$150.00
C. Full Name, Mailing Address and Zip Code Nat'l Assoc. of the Home Builders PAC 1201 15th Street NW Washington, DC 20005-2800		03/09/2000	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	\$1000.00
D. 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 ->	
E. 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 ->	
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)	\$4650.00
TOTAL This Period (last page this line number only)	\$45450.00

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be valid 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)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of each Receipt this Period
Community Banks, NA Second and Carroll Street Saint Clair, PA 17970-		01/06/2000	\$80.19
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$80.19	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of each Receipt this Period
Community Banks, NA Second and Carroll Street Saint Clair, PA 17970-		02/08/2000	\$82.38
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$162.57	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of each Receipt this Period
Community Banks, NA Second and Carroll Street Saint Clair, PA 17970-		03/08/2000	\$59.94
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$222.51	
D. 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)	Occupation		
	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
		/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	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
		/ /	
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	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)	Occupation		
	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	\$222.51
TOTAL This Period (last page this line number only)	\$222.51

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from such Reports and Statements may not be 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)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT & T PO Box 8221 Fox Valley, IL 60572-8221	Phone charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/14/2000	\$21.28
B. Full Name, Mailing Address and Zip Code Bank Card Services P.O. Box 15019 Wilmington, DE 19886-	Meals & Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/2000	\$519.28
C. Full Name, Mailing Address and Zip Code Bank Card Services P.O. Box 15019 Wilmington, DE 19886-	Meals and lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/03/2000	\$111.39
D. Full Name, Mailing Address and Zip Code P & X Sales P.O. Box 68 Port Carbon, PA 17965-	Labels Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/05/2000	\$573.78
E. Full Name, Mailing Address and Zip Code St. Clair Fish & Game PO BOX 125 St. Clair, PA 17970	Hall Rental 03/03 FR Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/17/2000	\$459.30
F. Full Name, Mailing Address and Zip Code U.S. Postmaster (St. Clair) West Carroll Street St. Clair, PA 17970-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/20/2000	\$14.73
G. Full Name, Mailing Address and Zip Code U.S. Postmaster (St. Clair) West Carroll Street St. Clair, PA 17970-	FEC Mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/16/2000	\$11.24

SUBTOTAL of Disbursements This Page (optional)	\$1710.80
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from such Reports and Schedules 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)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster (St. Clair) West Carroll Street St. Clair, PA 17970-	Postage/FEC mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/15/2000	\$16.52
U.S. Postmaster (St. Clair) West Carroll Street St. Clair, PA 17970-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/04/2000	\$4.30
U.S. Postmaster (St. Clair) West Carroll Street St. Clair, PA 17970-	03/03PR Mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/10/2000	\$476.93
U.S. Postmaster (St. Clair) West Carroll Street St. Clair, PA 17970-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/07/2000	\$33.00
U.S. Postmaster (St. Clair) West Carroll Street St. Clair, PA 17970-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/08/2000	\$100.00
U.S. Postmaster (St. Clair) West Carroll Street St. Clair, PA 17970-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/23/2000	\$2.53
U.S. Postmaster (St. Clair) West Carroll Street St. Clair, PA 17970-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/22/2000	\$2.31

SUBTOTAL of Disbursements This Page (optional)	\$635.59
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster (St. Clair) West Carroll Street St. Clair, PA 17970-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/14/2000	\$99.00
U.S. Postmaster (St. Clair) West Carroll Street St. Clair, PA 17970-	Mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/28/2000	\$57.09
AT&T PO BOX 9001309 Louisville, KY 40290-	Phone Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/11/2000	\$28.86
AT&T PO BOX 9001309 Louisville, KY 40290-	Long Distance Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/17/2000	\$24.28
Riveredge Restaurant And Motor Inn Rt. 103, Greenfields Reading, PA 19601-	Food&Bev 3/24FR Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/24/2000	\$6500.00
David L. Andrukitis, Inc. 50 E Street, S.E. Washington, DC 20003-	Print xmas cards Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/03/2000	\$398.00
Aristotle Industries 205 Pennsylvania Avenue, SE Washington, DC 20003-	Software License Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/05/2000	\$825.00

SUBTOTAL of Disbursements This Page (optional)	\$7932.23
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from such requests 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)
FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Our Lads Beer & Soda Dist. East Centre Street Ashland, PA 17921-	Refreshments 03/03 FR Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/17/2000	\$288.00
B. Full Name, Mailing Address and Zip Code Bell Atlantic-PA P.O. Box 28000 Lehigh Valley, PA 18002-8000	Phone Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/11/2000	\$85.20
C. Full Name, Mailing Address and Zip Code Bell Atlantic-PA P.O. Box 28000 Lehigh Valley, PA 18002-8000	Phone Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/14/2000	\$85.20
D. Full Name, Mailing Address and Zip Code Bell Atlantic-PA P.O. Box 28000 Lehigh Valley, PA 18002-8000	Phone 03/04 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/10/2000	\$85.20
E. Full Name, Mailing Address and Zip Code Ted Bortnick 55 West Ridge Street PA Sports Hall of Fame Coaldale, PA 18218-	Advertisement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/2000	\$50.00
F. Full Name, Mailing Address and Zip Code Senior Charity Bowl PO Box 1035 Pottsville, PA 17901-	Advertisement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/10/2000	\$30.00
G. Full Name, Mailing Address and Zip Code Scott Brennan R.D. 3, Mill Creek Pottsville, PA 17901-	Refreshments 3/3 FR Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/18/2000	\$827.18

SUBTOTAL of Disbursements This Page (optional)	\$1050.78
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule (a) for each category of the Detailed Summary Page	PAGE	OF
	5	11
FOR LINE NUMBER		17

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NAME OF COMMITTEE (in full)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Scott Brennan R.D. 3, Mill Creek Pottsville, PA 17901-	Xmas Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/03/2000	\$273.85
B. Full Name, Mailing Address and Zip Code Allen-Rogowicz Chapter PA Sports Hall of Fame 1592 Dogwood Lane Orwigsburg, PA 17961-	Dues Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/24/2000	\$5.00
C. Full Name, Mailing Address and Zip Code National Democratic Club 30 Ivy Street Washington, DC 20003-4071	02/17/00 Breakfast Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/17/2000	\$419.88
D. Full Name, Mailing Address and Zip Code Democratic City Committee Attn: Vaughn Spencer 1220 Douglas Street Reading, PA 19604-	Election day advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/10/2000	\$75.00
E. Full Name, Mailing Address and Zip Code St Clair Sesquicent Committee 606 Wade Road Saint Clair, PA 17970-	Tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/16/2000	\$70.00
F. Full Name, Mailing Address and Zip Code Horizons Communication Corp. 4501 Western Avenue, N.W. Washington, DC 20016-	FR invitations Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/10/2000	\$2500.98
G. Full Name, Mailing Address and Zip Code Community Banks, NA Second and Carroll Street Saint Clair, PA 17970-	Returned Chk - E. Chudnovsky Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/24/2000	\$75.00

SUBTOTAL of Disbursements This Page (optional)	\$3419.71
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement This Period
Laser Communication Company 12413 Clifton Hunt Drive Clifton, VA 20124-	03/16FR Mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/25/2000	\$707.00
John Connelly Jr. 109-12 Walnut Street Harrisburg, PA 17101-	Consulting Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/28/2000	\$1000.00
Hidden Valley Golf Course, Inc. 1753 Panther Valley Road Pine Grove, PA 17963-	FR Deposit Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/17/2000	\$100.00
Commonwealth of PA Dept. of State Department of State 303 North Office Building Harrisburg, PA 17120-	Filing fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/07/2000	\$150.00
Eastern Press P.O. Box 1232 2067 W. Market Street Pottsville, PA 17901-	FR Tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/05/2000	\$225.25
American Express P.O. Box 42010 Philadelphia, PA 19162-4201	Meals & Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/25/2000	\$283.56
American Express P.O. Box 42010 Philadelphia, PA 19162-4201	Meals/Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/21/2000	\$720.47

SUBTOTAL of Disbursements This Page (optional)	\$3186.28
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Express PO BOX 1270 Newark, NJ 07101-	Meals & Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/24/2000	\$302.20
B. Full Name, Mailing Address and Zip Code Schuylkill County Fire Police Assoc. RD 1 BOX 1336 Tamaqua, PA 18252-	Advertisement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/14/2000	\$75.00
C. Full Name, Mailing Address and Zip Code DelCamp's Grocery Mill and Patterson Streets Saint Clair, PA 17970-	Refreshments Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/25/2000	\$45.04
D. Full Name, Mailing Address and Zip Code Bonner Group, Inc. PO Box 523523 Springfield, VA 22152-	Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/17/2000	\$105.07
E. Full Name, Mailing Address and Zip Code Bonner Group, Inc. PO Box 523523 Springfield, VA 22152-	02/00 Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/17/2000	\$123.37
F. Full Name, Mailing Address and Zip Code Bonner Group, Inc. PO Box 523523 Springfield, VA 22152-	03/00 Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/25/2000	\$2750.00
G. Full Name, Mailing Address and Zip Code Bonner Group, Inc. PO Box 523523 Springfield, VA 22152-	02/00 Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/28/2000	\$2750.00

SUBTOTAL of Disbursements This Page (optional)	\$6150.68
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bonner Group, Inc. PO Box 523523 Springfield, VA 22152-	12/99, 01/00 fee and exp reim Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/07/2000	\$7599.78
Bonner Group, Inc. PO Box 523523 Springfield, VA 22152-	04/00 Consulting Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/24/2000	\$2750.00
Bonner Group, Inc. PO Box 523523 Springfield, VA 22152-	Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/21/2000	\$59.37
Tim Holden Pearl Street Saint Clair, PA 17970-	Filing Fee Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/11/2000	\$112.00
PA State Assoc. Jury Commissioners c/o Peggy Zimmerman RR 1 BOX 1132 Mt Road Tamaqua, PA 18252-	Advertisement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/10/2000	\$25.00
Thomas V. Nawrocki, P.A. P.O. Box 97 Saint Clair, PA 17970-	02/00 Retainer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/03/2000	\$1350.00
Thomas V. Nawrocki, P.A. P.O. Box 97 Saint Clair, PA 17970-	01/00 Retainer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/28/2000	\$1350.00

SUBTOTAL of Disbursements This Page (optional)	\$13246.15
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (in Full)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Thomas V. Nawrocki, P.A. P.O. Box 97 Saint Clair, PA 17970-	12/99 Retainer and eoy work Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/03/2000	\$2700.00
Thomas V. Nawrocki, P.A. P.O. Box 97 Saint Clair, PA 17970-	03/00 Retainer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/31/2000	\$1350.00
Schoykill Chapter No. 25 The National Football Foundation and Hall of Fame Pottsville, PA 17901-	Advertisement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/17/2000	\$25.00
Irish American Assoc Of Panther Valley John Early 84 2nd Street Cosldale, PA 18218-	Advertisement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/10/2000	\$50.00
United Labor Council Of Reading and Berks 116 North 5th Street Reading, PA 19601-	Ticket & Advertisement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/31/2000	\$100.00
Jimmie Kramer's Peanut Bar 332 Penn Street Reading, PA 19602-	Meals Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/25/2000	\$108.78
U.S. Postmaster Pottsville 450 North Centre Street Pottsville, PA 17901-	03/31FR Mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/10/2000	\$495.00

SUBTOTAL of Disbursements This Page (optional)	\$4828.78
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (in full)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Creative Printing Company 430 S. Hoffman Boulevard Ashland, PA 17921-	Invitations Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/25/2000	\$105.50
Creative Printing Company 430 S. Hoffman Boulevard Ashland, PA 17921-	Envelopes and Letterhead Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/14/2000	\$519.40
Creative Printing Company 430 S. Hoffman Boulevard Ashland, PA 17921-	FR Tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/14/2000	\$164.30
Creative Printing Company 430 S. Hoffman Boulevard Ashland, PA 17921-	03/31FR Invitations Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/17/2000	\$795.00
Travelers Protective Assc. 213 W Center Street Mahanoy City, PA 17948-	Advertisement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/25/2000	\$25.00
U.S. Postmaster Reading 59 North 5th Street Attn: Ms. Sandra Keller-Williams Reading, PA 19610-	Semi-annual Box Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/17/2000	\$22.00
U.S. Postmaster Reading 59 North 5th Street Attn: Ms. Sandra Keller-Williams Reading, PA 19610-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/25/2000	\$330.00

SUBTOTAL of Disbursements This Page (optional)	\$2041.20
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Southern Schuylkill Reg. Holy Name Soc. Holy Name Society 5 North 22nd Street Pottsville, PA 17901-	Dinner Program Bulletin Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/24/2000	\$20.00
Rushanan Catering 108 Arlene Street Minersville, PA 17954-	03/03 FR Food Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/03/2000	\$2850.00
Schuylkill County Special Olympics Att: Mr. Pete Fatula Schuylkill County I.U. #29 Mar Lin, PA 17951-	Advertisement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/10/2000	\$30.00
Schuylkill Valley Teener Baseball RD #3 Pottsville, PA 17901-	Advertisement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/17/2000	\$20.00
Berks Community Television 645 Penn Street Reading, PA 19601-	Membership Dues Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/24/2000	\$25.00
The Hamburg Item The Hamburg Item PO BOX 31 Hamburg, PA 19526-	Advertisement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/31/2000	\$92.00
Schuylkill County Vol. FF Assoc PO BOX 68 Port Carbon, PA 17965-	Advertisement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/25/2000	\$100.00

SUBTOTAL of Disbursements This Page (optional)	\$3137.00
TOTAL This Period (last page this line number only)	\$47339.20

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NAME OF COMMITTEE (in Full)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement This Period
Hoeffel for Congress 25 West Airy Street Norristown, PA 19401-	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Extraordinary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/24/2000	\$1000.00
B. Full Name, Mailing Address and Zip Code Pomona Grange Grace Kohl RR#2 BOX 564 B Northumberland, PA 17857-	Purpose of Disbursement Legislative Night Ticket Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/21/2000	\$9.00
C. Full Name, Mailing Address and Zip Code St. Clair Fish & Game PO BOX 125 St. Clair, PA 17970	Purpose of Disbursement Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/24/2000	\$50.00
D. Full Name, Mailing Address and Zip Code Lady Generals 16 & Under 569 Seltzer Road Pottsville, PA 17901-	Purpose of Disbursement Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/14/2000	\$25.00
E. Full Name, Mailing Address and Zip Code Mental Health Assoc. of NE PA c/o CSP of Schuylkill Co. 25 North Centre Street Pottsville, PA 17901-	Purpose of Disbursement Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/2000	\$25.00
F. Full Name, Mailing Address and Zip Code All Regional Athletics Softball RR1 BOX 1292A Barnesville, PA 18214-	Purpose of Disbursement Sponsor Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/17/2000	\$50.00
G. Full Name, Mailing Address and Zip Code Casey For Auditor General 2311 North Front Street Suite 409 Harrisburg, PA 17110-	Purpose of Disbursement Political contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/10/2000	\$1000.00

SUBTOTAL of Disbursements This Page (optional)	\$2159.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JPG Scholarship Auxiliary 537 Schuylkill Avenue Reading, PA 19601-	3 Tix-banquet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/2000	\$45.00
B. Full Name, Mailing Address and Zip Code Democratic Congress. Campaign Committee 430 South Capitol Street Washington, DC 20003-	Purpose of Disbursement Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/19/2000	\$20000.00
C. Full Name, Mailing Address and Zip Code Democratic Congress. Campaign Committee 430 South Capitol Street Washington, DC 20003-	Purpose of Disbursement Political Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/17/2000	\$1000.00
D. Full Name, Mailing Address and Zip Code United Cerebral Palsy Agricultural Park Pottsville, PA 17901-	Purpose of Disbursement Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/25/2000	\$25.00
E. Full Name, Mailing Address and Zip Code Allied Democratic Club of Berks County Att: Louise Snyder 1118 Exeter Street Reading, PA 19604-	Purpose of Disbursement PR Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/25/2000	\$185.00
F. Full Name, Mailing Address and Zip Code Democratic Co. Comm. Of Berks 1301 North 13th Street Reading, PA 19604-	Purpose of Disbursement Spring Fling Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/24/2000	\$300.00
G. Full Name, Mailing Address and Zip Code Italian Heritage Council of Berks Co. P.O. Box 192 Reading, PA 19603-	Purpose of Disbursement Scholarship Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/14/2000	\$60.00

SUBTOTAL of Disbursements This Page (optional)	\$21615.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Northumberland Democratic Committee Pennsylvania National Bank Building 117 W. Independence Street Shamokin, PA 17872-	Century Club Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/17/2000	\$100.00
Cystic Fibrosis Foundation NE PA 1541 Alta Avenue Suite 102 Whitehall, PA 18052-	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/31/2000	\$150.00
Berks County Friends of the NRA c/o Dennis Eickley 3704 Reading Crest Avenue Reading, PA 19605-	4Tix-04/29 Banquet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/31/2000	\$104.00
The Spirit of Hope Foundation 1314 E. Centre Street Mahanoy City, PA 17948-	Sponsor Golf Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/25/2000	\$50.00
Independant Hose Company #1 PO BOX 194 Diener's Hill Saint Clair, PA 17970-	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/24/2000	\$25.00
Sunbury Community Hospital 350 North Eleventh Street Sunbury, PA 17801-	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/25/2000	\$200.00
Friends of Judith Kraines 40E Arrowhead Trail Reading, PA 19608-	Political Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/25/2000	\$100.00

SUBTOTAL of Disbursements This Page (optional)	\$729.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 FRIENDS OF CONGRESSMAN TIM HOLLEN

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENT	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
Ashland Teener League R.D. #2 25 Spruce Street Ashland, PA 17921-	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/17/2000	\$25.00
Pottsville Lions Legion Baseball R.D. #1, Box 1061 Rosewood Drive Pottsville, PA 17901-	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/17/2000	\$25.00
The American Legion Post #201 609 Market Street Sunbury, PA 17801-	Banquet Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/16/2000	\$8.00
Watsonstown Lioness Club RR1 BOX 404 Allenwood, PA 17810-	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/03/2000	\$25.00
New Philadelphia Little League B'ball 37 McComb Street New Phila, PA 17959-	Patron Fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/17/2000	\$25.00
Fon da Grundsow Lodge c/o Richard Koch R.R. #1, Box 1237 Tamaqua, PA 18252-	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/10/2000	\$15.00
Victor Emmanuel Men's Lodge 311 Hazle Street Reading, PA 19611-	Banquet Patron Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/25/2000	\$25.00

SUBTOTAL of Disbursements This Page (optional)	\$148.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to elect O'Brian PO BOX 447 Bethlehem, PA 18018-	FR Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/28/2000	\$40.00
J. Full Name, Mailing Address and Zip Code Junior Achievement Of Berks County 601 Penn Street Suite 105 Reading, PA 19601-	Dinner Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/24/2000	\$20.00
K. Full Name, Mailing Address and Zip Code American Red Cross Of Sunbury Area 30 N Fifth St Sunbury, PA 17801-	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/10/2000	\$25.00
L. Full Name, Mailing Address and Zip Code Creative Printing Company 430 S. Hoffman Boulevard Ashland, PA 17921-	Ticket Sponsor Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/14/2000	\$84.80
M. Full Name, Mailing Address and Zip Code St. Jerome Regional School 250 West Broad Street Tamaqua, PA 18252-	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/10/2000	\$25.00
N. Full Name, Mailing Address and Zip Code Terry Reiley 200 North 18th Street Pottsville, PA 17901-	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	01/19/2000	\$100.00
O. Full Name, Mailing Address and Zip Code Saint Canicus Parish 23 South Catawissa Street Mahanoy City, PA 17948-	Patron Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/17/2000	\$30.00

SUBTOTAL of Disbursements This Page (optional)	\$324.80
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (IN FULL)
 FRIENDS OF CONGRESSMAN TIM HOLDEN

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
Big Brother Schuylkill County 91 South Progress Avenue Pottsville, PA 17901-	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/10/2000	\$25.00
B. Full Name, Mailing Address and Zip Code Lone Pine Sportmen's Club PO Box 81 Middleport, PA 17953-	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/24/2000	\$25.00
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):	/ /	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):	/ /	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):	/ /	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):	/ /	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):	/ /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$50.00
TOTAL This Period (last page this line number only)	\$25025.80

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 4-3-00
<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>Jel</i> PREPARER	4-7-00 DATE PREPARED