REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
MURTHA FOR CONGRESS COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported.
ET FINANCIAL PLAZA - SUITE 220
551 MAIN STREET

CITY, STATE and ZIP CODE
JOHNSTOWN, PA 15901

STATE/DISTRICT
PA/12TH DISTRICT

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 JAN 31 P 1:29

2. FEC IDENTIFICATION NUMBER
041343 C00019075

3. IS THIS REPORT AN AMENDMENT?
☐ YES ☒ NO

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report
- ☐ July 15 Quarterly Report
- ☐ October 15 Quarterly Report
- ☒ January 31 Year End Report
- ☐ July 31 Mid-Year Report (Non-election Year Only)
- ☐ 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
- ☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____
- ☐ Termination Report

This report contains activity for ☒ Primary Election 2000 ☒ General Election 2000 ☐ Special Election ☐ Runoff Election

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period JULY 1, 1999 through DEC. 31, 1999		
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	143,325.00	318,625.00
	(b) Total Contribution Refunds (from Line 20(d))		
	(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	143,325.00	318,625.00
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	135,156.11	272,624.50
	(b) Total Offsets to Operating Expenditures (from Line 14)	544.17	967.65
	(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	134,611.94	271,656.85
8.	Cash on Hand at Close of Reporting Period (from Line 27)	179,975.50	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	-0-	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	9,051.51	

For further information contact:
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
ROBERT C. OLDICK

Signature of Treasurer

Date
1/24/00

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

FE7AN048

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

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

Name of Committee (in full): MURTHA FOR CONGRESS COMMITTEE

Report Covering the Period: From: JULY 1, 1999 To: DEC. 31, 1999

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date	
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)	53,825.00		11(a)(i)
(ii) Unitemized			11(a)(ii)
(iii) Total of contributions from Individuals	53,825.00	107,625.00	11(a)(iii)
(b) Political Party Committees			11(b)
(c) Other Political Committees (such as PACs)	89,500.00	211,000.00	11(c)
(d) The Candidate			11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	143,325.00	318,625.00	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES			12
13. LOANS:			
(a) Made or Guaranteed by the Candidate			13(a)
(b) All Other Loans			13(b)
(c) TOTAL LOANS (add 13(a) and (b))			13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	544.17	967.65	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	668.90	1,155.21	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	144,538.07	320,747.86	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	135,156.11	272,624.50	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate			19(a)
(b) Of All Other Loans			19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))			19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees			20(a)
(b) Political Party Committees			20(b)
(c) Other Political Committees (such as PACs)			20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))			20(d)
21. OTHER DISBURSEMENTS	18,318.39	21,730.05	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	153,474.50	294,354.55	22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	$ 188,911.93	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	$ 144,538.07	24
25. SUBTOTAL (add Line 23 and Line 24)	$ 333,450.00	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	$ 153,474.50	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	$ 179,975.50	27

FE7AN049

MURTHA FOR CONGRESS COMMITTEE
BT FINANCIAL PLAZA - SUITE 220
551 MAIN STREET
JOHNSTOWN, PA 15901

SUPPLEMENT

A "BEST EFFORT" HAS BEEN MADE TO OBTAIN MISSING INFORMATION.

A LETTER WAS SENT TO EACH CONTRIBUTOR REQUESTING THE MISSING INFORMATION.

AS OF THIS REPORT FILING WE HAVEN'T RECEIVED A REPLY FROM EACH CONTRIBUTOR

THAT IS INCOMPLETE.

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 15

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Cakley Brooks Jr. 3032 Cambridge Place, NW Washington, DC 20007	Bow Bardier Aerospace 1023-15th Street NW Washington, DC 20005 President $1,000	7/27/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Etten 6704 Sioux Trail Edina, MN 55439	John Hopkins University 3400 North Charles St. Baltimore, MD 21218 Lobbvist $ 200	7/27/99	$ 200
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Raymond George 5550 Darlington Road Pittsburgh, PA 15217	Siemen's Westinghouse 11 Stanwix Street Pittsburgh, PA 15222 Engineer $ 100	7/27/99	$ 100
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Melvin Goodweather 820 Emerald Drive Alexandria, VA 22308	Airbus Industries 700-13th St, NW #950 Washington, DC 20005 Senior Director $ 1,000	7/27/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Francis Grecek 1203 Lincoln Drive Portage, PA 15946	— Disabled $ 250	7/27/99	$ 250
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
John Gruver 2649 Turf Valley Road Ellicott City, MD 21042	Westinghouse 600 New Hampshire #1200 Washington, DC 20037 Consultant $ 500	7/27/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
John Parrish 32 Anderson Street #2 Boston, MA 02114	MA General Hospital Fruit Street Boston, MA 02114 M.D. $ 500	7/27/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			

SUBTOTAL of Receipts This Page (optional) $3,550

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 15

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (In Full)

Murthn for Congress Committee

A. Full Name, Mailing Address and ZIP Code Michael O'Connor 38683 Mt. Gilead Road Leesburg, VA 20175 Receipt For: [X] Primary [X] General [ ] Other (specify):	Name of Employer O'Connor & Pierce Assoc 600 NH Ave., NW #1010 Washington, DC 20037 Occupation Aggregate Year-to-Date > $ 2,000	Date (month, day, year) 8/30/99 8/30/99	Amount of Each Receipt this Period $1,000 P $1,000 G
B. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	$2,000
TOTAL This Period (last page this line number only)	

FE7AN049

SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mellon Baird 4204 Green Cliffs Road Austin, TX 78746	Titan Syc. Corp. 3033 Science Park Road San Diego, CA 92121 Occupation: President Aggregate Year-to-Date > $1,000	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
John Barnum 23640 Skyview Ter. Los Gatos, CA 95030	Condor Systems 2133 Samaritan Drive San Jose, CA 95124 Occupation: Sr. VP Aggregate Year-to-Date > $ 500	9/22/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Michael Bilinski 6972 Port Rowan Drive San Jose, CA 95119	Condor Systems 2133 Samaritan Drive San Jose, CA 95124 Occupation: Dir. of Quality Assurance Aggregate Year-to-Date > $ 500	9/22/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Cordis Colburn 7618 Glenville Court Springfield, VA 22153	General Dynamics 3190 Fairview Park Drive Falls Church, VA 22042 Occupation: Gov't Relations Aggregate Year-to-Date > $ 500	9/22/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Vernon Dale 22971 Stonebridge Avenue Cupertino, CA 95014	Condor Systems 2133 Samaritan Drive San Jose, CA 95124 Occupation: VP of Business Dev. Aggregate Year-to-Date > $ 500	9/22/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Laurel Davis 23651 Via Delfina Santa Clarita, CA 91355	Condor Electronic Sys. 2133 Samaritan Drive San Jose, CA 95124 Occupation: President Aggregate Year-to-Date > $ 500	9/22/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Dena Marie Demarco 3802 Canon Street San Diego, CA 92106	Coldwell Banker Occupation: Real Estate Agent Aggregate Year-to-Date > $ 1,000	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			

SUBTOTAL of Receipts This Page (optional) $4,500

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

SCHEDULE A — ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 4 | OF 15 | FOR LINE NUMBER 11(a)i

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Gordon England 4408 Lost Creek Blvd. Aledo, TX 76008-3661	General Dynamics 3190 Fairview Park Drive Falls Church, VA 22042 Executive VP $1,000	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Patrick Fulton 939 Runnymead Lane San Diego, CA 92106	Performance Contr. Inc. 2015 Main Street San Diego, CA 92113 Contractor $1,000	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Gorda 5021 Nighthawk Way Oceanside, CA 92056	Titan Linkabit Division 3033 Science Park Road San Diego, CA 92121 COO/President $1,000	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
David Klingler 18805 Aspesi Drive Saratoga, CA 95070	Condor Systems 2133 Samaritan Drive San Jose, CA 95124 Vice President $ 500	9/22/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Robert Leathers	Cartwright Electronics 655 W. Valencia Drive Fullerton, CA 92832-2104 President $1,000	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Joyce Maurer 1815 Linden Lake Road Ft. Collins, CO 80524	Housewife $ 500	9/22/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Richard McInnis 9503 Waterline Drive Burke, VA 22015	Condor Systems 1755 Jefferson Davis Hwy. Arlington, VA 22202 Dir. of Business Dev. $ 500	9/22/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			

3 TOTAL of Receipts This Page (optional) $5,500

TAL This Period (last page this line number only) .....

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 15

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Suzanne Mellor 32161 Pacific Coast Hwy. Laguna Beach, CA 92651	Name of Employer General Dynamics 3190 Fairview Park Dr. Falls Church, VA 22042 Occupation Board of Directors Aggregate Year-to-Date > $ 1,000	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
B. Full Name, Mailing Address and ZIP Code Thomas Michalski 1511 Revelstoke Way Sunnyvale, CA 94087	Name of Employer Condor Systems 2133 Samaritan Drive San Jose, CA 95124 Occupation Vice President Aggregate Year-to-Date > $ 500	9/22/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
C. Full Name, Mailing Address and ZIP Code Michael Mollin 18735 Caminito Cantilena #202 San Diego, CA 92128	Name of Employer Titan Visicom Division 3033 Science Park Road San Diego, CA 92121 Occupation Chief Financial Officer Aggregate Year-to-Date > $ 1,000	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
D. Full Name, Mailing Address and ZIP Code Gene Ray PO Box 2464 Rancho Santa Fe, CA 95067	Name of Employer Titan 3033 Science Park Road San Diego, CA 92121 Occupation Chairman/CEO Aggregate Year-to-Date > $1,000	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
E. Full Name, Mailing Address and ZIP Code John Taft 5537 Perugia Cir. San Jose, CA 95138	Name of Employer Condor Systems 2133 Samaritan Drive San Jose, CA 95124 Occupation VP of Finance & Admin. Aggregate Year-to-Date > $ 500	9/22/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
F. Full Name, Mailing Address and ZIP Code James Temenak 212 Falcon Ridge Road Great Falls, VA 22066	Name of Employer General Dynamics-NASCO 3190 Fairview Park Drive Falls Church, VA 22042 Occupation Gov't Relations Aggregate Year-to-Date > $ 500	9/22/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
G. Full Name, Mailing Address and ZIP Code Sharon Tough 9825 Carlton Court Granite Bay, CA 95746	Name of Employer Occupation Housewife Aggregate Year-to-Date > $ 1,000	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			

SUBTOTAL of Receipts This Page (optional) $5,500

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

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 6 OF 15

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Steven Tough 9825 Carlton Ct. Granite Bay, CA 95746	Name of Employer Foundation Health Service 9825 Carlton Ct. Granite Bay, CA 95746 Occupation Consultant Aggregate Year-to-Date > $1,000	Date (month, day, year) 9/22/99	Amount of Each Receipt this Period $1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
B. Full Name, Mailing Address and ZIP Code James Turner, Jr. 6644 Holland Street McLean, VA 22101-1611	Name of Employer General Dynamics 3190 Fairview Park Dr. Falls Church, VA 22042 Occupation Corp. President Aggregate Year-to-Date > $1,000	Date (month, day, year) 9/22/99	Amount of Each Receipt this Period $1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
C. Full Name, Mailing Address and ZIP Code A.J. Veitch 2750 Royal View Oakland, MI 48363	Name of Employer General Dynamics-Land Sys PO Box 2074 Warren, MI 48090-2074 Occupation President Aggregate Year-to-Date > $1,000	Date (month, day, year) 9/22/99	Amount of Each Receipt this Period $1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
D. Full Name, Mailing Address and ZIP Code Gary Viljoen 629 Bryant Avenue Mountain View, CA 94040	Name of Employer Condor Systems 2133 Samaritan Drive San Jose, CA 95124 Occupation Chief Financial Officer Aggregate Year-to-Date > $ 500	Date (month, day, year) 9/22/99	Amount of Each Receipt this Period $ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
E. Full Name, Mailing Address and ZIP Code Richard Vortman 7715 Hidden Valley Court La Jolla, CA 92037	Name of Employer General Dynamics-NASCO PO Box 85278 San Diego, CA 92186 Occupation President Aggregate Year-to-Date > $1,000	Date (month, day, year) 9/22/99	Amount of Each Receipt this Period $1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
F. Full Name, Mailing Address and ZIP Code Robert Young 14642 Sobey Oaks Court Saratoga, CA 95070	Name of Employer Condor Systems 2133 Samaritan Drive San Jose, CA 95124 Occupation President & CEO Aggregate Year-to-Date > $ 500	Date (month, day, year) 9/22/99	Amount of Each Receipt this Period $ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
G. Full Name, Mailing Address and ZIP Code VOID	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):			

SUBTOTAL of Receipts This Page (optional) > $ 5,000

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 7 OF 15 | FOR LINE NUMBER: 11a(i)

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

	Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A.	James Fitzhenry 10454 NW Second Street Portland, OR 97231	FLIR Systems Inc. 16505 SW 72nd Avenue Portland, OR 97224 Occupation: VP-General Counsel Aggregate Year-to-Date: $ 1,000	10/27/99	$1,000
	Receipt For: [X] Primary [ ] General [ ] Other (specify):			
B.	Jay Gellert 440 Davis #913 San Francisco, CA 94111	Foundation Health Ser. 21650 Oxnard Street Woodland Hills, CA 91367 Occupation: President/CEO Aggregate Year-to-Date: $ 1,000	10/27/99	$1,000
	Receipt For: [X] Primary [ ] General [ ] Other (specify):			
C.	Preston Henne 1 Belfair Court Hilton Head, SC 29928	Gulfstream Aerospace 500 Gulfstream Road Savannah, GA 31402 Occupation: SVP-Programs Aggregate Year-to-Date: $ 1,000	10/27/99	$1,000
	Receipt For: [X] Primary [ ] General [ ] Other (specify):			
D.	Ronald LaRose 40 Willow Pond Saginaw, MI 48603	Advanced Refractory Tech 699 Hertel Avenue Buffalo, NY 14225 Occupation: VP-COO Aggregate Year-to-Date: $ 200	10/27/99	$ 200
	Receipt For: [X] Primary [ ] General [ ] Other (specify):			
E.	VOID	Name of Employer: Occupation: Aggregate Year-to-Date: $	Date (month, day, year):	Amount of Each Receipt this Period:
	Receipt For: [ ] Primary [ ] General [ ] Other (specify):			
F.	Allen Paulson 14497 Emerald Lane Rancho Santa Fe, CA 92067	Self-Employed PO Box 9660 Rancho Santa Fe, CA 92067 Occupation: Independent Investor Aggregate Year-to-Date: $1,000	10/27/99	$1,000
	Receipt For: [X] Primary [ ] General [ ] Other (specify):			
G.	Nacelaine Paulson 14497 Emerald Lane Rancho Santa Fe, CA 92067	Name of Employer: Occupation: Homemaker Aggregate Year-to-Date: $1,000	10/27/99	$1,000
	Receipt For: [X] Primary [ ] General [ ] Other (specify):			

SUBTOTAL of Receipts This Page (optional): $5,200

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 8 OF 15

FOR LINE NUMBER: Ila(i)

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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code

VOID

Name of Employer

Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date >

B. Full Name, Mailing Address and ZIP Code

J. Mark Samper
13611 SW Michelle Court
Tigard, OR 97223

Name of Employer: FLIR Systems Inc.
16505 SW 72nd Avenue
Portland, OR 97224

Occupation: VP-CFO

Date (month, day, year): 10/27/99

Amount of Each Receipt this Period: $1,000

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $1,000

C. Full Name, Mailing Address and ZIP Code

Jonathan Scheff
6450 Avenida Cresta
La Jolla, CA 92037

Name of Employer: Foundation Health Ser.
2025 Aerojet Drive
Rancho Cordova, CA 95742

Occupation: Sr. VP/Chief Med. Off.

Date (month, day, year): 10/27/99

Amount of Each Receipt this Period: $ 500

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $ 500

D. Full Name, Mailing Address and ZIP Code

Richard Tierney
22641 White Oaks
Mission Viejo, CA 92692

Name of Employer: Interstate Electronics
602 Vermont Avenue
Anahein, CA 92803

Occupation: President

Date (month, day, year): 10/27/99

Amount of Each Receipt this Period: $1,000

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $1,000

E. Full Name, Mailing Address and ZIP Code

Gary Velasquez
67 Trinadad Drive
Tiburon, CA 94920

Name of Employer: Foundation Health Ser.
1600 Los Gamos #300
San Rafael, CA 94903

Occupation: President/CEO Gov't Ct.

Date (month, day, year): 10/27/99

Amount of Each Receipt this Period: $1,000

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $1,000

F. Full Name, Mailing Address and ZIP Code

James Weys
2040 Spanish Bar Ct.
Gold River, CA 95670

Name of Employer: Foundation Health Fed. Servs.
2025 Aerojet Drive
Rancho Cordova, CA 95742

Occupation: COO

Date (month, day, year): 10/27/99

Amount of Each Receipt this Period: $ 750

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $ 750

G. Full Name, Mailing Address and ZIP Code

VOID

Name of Employer

Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

SUBTOTAL of Receipts This Page (optional) $4,250

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 9 OF 15

FOR LINE NUMBER 11a(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)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code
William Martin
16652 Woodsman Ct.
Lake Oswego, OR 97034

Name of Employer: FLIR Systems, Inc.
16505 SW 72nd Avenue
Portland, OR 97224

Occupation: VP-Sales

Date (month, day, year): 11/22/99

Amount of Each Receipt this Period: $1,000

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $ 1,000

B. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer

Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

C. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer

Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

D. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer

Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

E. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer

Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

F. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer

Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

G. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer

Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

SUBTOTAL of Receipts This Page (optional) > $1,000

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

FEC/AOSP

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 10 OF 15

FOR LINE NUMBER 11a(1)

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)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
William Martin 16652 Woodsman Ct. Lake Oswego, OR 97034	FLIR Systems, Inc. 16505 SW 72nd Avenue Portland, OR 97224 VP-SALES	11/30/99	$(1,000)
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
VOID	(RETURNED BY BANK INSUFFICIENT FUNDS)		
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	$(1,000)
TOTAL This Period (last page this line number only)	

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SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 11 OF 15

FOR LINE NUMBER 11a(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)

Martha for Congress Committee

A. Full Name, Mailing Address and ZIP Code David Alcorn 3490 Harrowgate Road York, PA 17402	Name of Employer Donlee Tech. Inc. 693 North Hills Road York, PA 17402 Occupation Chairman & CEO	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $ 500
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,500		
B. Full Name, Mailing Address and ZIP Code Thomas Brady 10 Lawson Road Winchester, MA 01890	Name of Employer Partners Health Care 800 Boylston Street Boston, MA 20199 Occupation Medical Doctor	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000		
C. Full Name, Mailing Address and ZIP Code Loretta Cassidy 7521 Old Dominion Drive McLean, VA 22102	Name of Employer Occupation Homemaker	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000		
D. Full Name, Mailing Address and ZIP Code William Cloherty 1 Harvest Road Wakefield, MA 01880	Name of Employer Self-Employed 447 Nantasket Avenue Hull, MA 02045 Occupation Consultant	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $ 250
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,250		
E. Full Name, Mailing Address and ZIP Code Rhonda Cohen 7 West Sunset Avenue Philadelphia, PA 19118-3621	Name of Employer Ballard Spahr Andrews.. 1735 Market Street, 51 Fl. Philadelphia, PA 19103 Occupation Atty. (Partner)	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500		
F. Full Name, Mailing Address and ZIP Code Connerton & Ray For the Partners of:	Name of Employer Occupation 	Date (month, day, year) 	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code Robert Connerton	Name of Employer Connerton & Ray 1401 New York Ave, NW 10th Fl. Washington, DC 20005-2102 Occupation Atty. (Partner)	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500		

SUBTOTAL of Receipts This Page (optional) > $3,750

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 12 OF 15

FOR LINE NUMBER 11a(1)

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
James Ray See Supplement	Connerton & Ray 1401 New York Ave., NW 10th Fl. Washington, DC 20005-2102 Occupation: Atty. (Partner) Aggregate Year-to-Date > $ 500	12/28/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
John Connors, Jr. 71 Sears Road Brookline, MA 02445	HHCC 200 Clarendon Street Boston, MA 02116 Occupation: Chairman/CEO Aggregate Year-to-Date > $ 2,000	12/28/99	$1,000
Receipt For: [ ] Primary [X] General [ ] Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Evo David Deconcini 12627 Rue Sienne Nord San Diego, CA 92131	Self-Employed 12627 Rue Sienne Nord San Diego, CA 92131 Occupation: Real Estate Agent Aggregate Year-to-Date > $ 1,000	12/28/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Dunnington 101 Paddock Lane Pittsburgh, PA 15236	U.S. Army Corps of Engrs. 1000 Liberty Avenue Pittsburgh, PA 15222 Occupation: Contract Specialist Aggregate Year-to-Date > $ 50	12/28/99	$ 50
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ann Eppard 14 Wolfe Street Alexandria, VA 22314	Ann Eppard Assoc. Ltd. 14 Wolfe Street Alexandria, VA 22314 Occupation: Lobbyist Aggregate Year-to-Date > $ 2,000	12/28/99	$1,000
Receipt For: [ ] Primary [X] General [ ] Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Gus Gleason 807 Gouchor Street Johnstown, PA 15905	Occupation: Retired Aggregate Year-to-Date > $ 75	12/28/99	$ 75
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Glynn III 15 Prentiss Lane Belmont, MA 02478	Partners Health Care 800 Boylston Street Boston, MA 02199 Occupation: Chief Operating Officer Aggregate Year-to-Date > $ 2,000	12/28/99	$1,000
Receipt For: [ ] Primary [X] General [ ] Other (specify):			

SUBTOTAL of Receipts This Page (optional)	$4,625
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 13 OF 15

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Darryl Jacobs 40 Maple Drive Spring Church, PA 15686-0040	Name of Employer South Bend Limestone Co. Route 156 Spring Church, PA 15686	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation President/Owner		
	Aggregate Year-to-Date > $ 1,000		
B. Full Name, Mailing Address and ZIP Code Phyllis Kaminsky 922 Windan Lane Johnstown, PA 15905	Name of Employer Self-Employed 922 Windan Lane Johnstown, PA 15905	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $ 250
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Consultant		
	Aggregate Year-to-Date > $ 250		
C. Full Name, Mailing Address and ZIP Code Alan Mauk 3360 Golden Hill Road Church Creek, MD 21622	Name of Employer Alan Mauk Assoc. Ltd. 2121 Jamison Avenue #1405 Alexandria, VA 22314	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Lobbyist		
	Aggregate Year-to-Date > $ 1,000		
D. Full Name, Mailing Address and ZIP Code Robert McVey 539 Silk Oak Drive Venice, FL 34293	Name of Employer ASIC 1 MA Ave., NW #330 Washington, DC 20001	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Chairman/CEO		
	Aggregate Year-to-Date > $ 500		
E. Full Name, Mailing Address and ZIP Code Nathan Nygaard 1614 Bertram Street Honolulu, HI 96816-1929	Name of Employer Queen's Health Care Plan 2 Water Front Plaza Honolulu, HI 96813	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $ 200
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Health Care Exec.		
	Aggregate Year-to-Date > $ 200		
F. Full Name, Mailing Address and ZIP Code Joseph O'Neill 6448 Brooks Lane Bethesda, MD 20816	Name of Employer PSW, Inc. 633 PA Ave., NW 4th Fl. Washington, DC 20004	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation President		
	Aggregate Year-to-Date > $ 1,000		
G. Full Name, Mailing Address and ZIP Code Susan O'Neill 5910 Gloster Road Bethesda, MD 20816	Name of Employer Self-Employed 5910 Gloster Road Bethesda, MA 20816	Date (month, day, year) 12/28/99 & 12/28/99	Amount of Each Receipt this Period $ 500 P & $ 500 P
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Consultant		
	Aggregate Year-to-Date > $ 1,000		

SUBTOTAL of Receipts This Page (optional)	$4,950
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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FOR LINE NUMBER 11a(1)

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NAME OF COMMITTEE (In Full)

Martha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Juliet Pacquing 3509 King Arthur Road Annandale, VA 22003	Name of Employer American Sys. Int'l 1 MA Avenue, NW Washington, DC 20001 Occupation Director	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500		
B. Full Name, Mailing Address and ZIP Code John Parrish, MD 32 Anderson Street #2 Boston, MA 02114	Name of Employer MA General Hospital 55 Fruit Street Boston, MA 02114 Occupation Medical Doctor	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $1,000
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,500		
C. Full Name, Mailing Address and ZIP Code Ronald Rubin 243 Conshohocken State Road Narberth, PA 19072	Name of Employer PA-REIT 200 South Broad St. 3rd Fl. Philadelphia, PA 19102 Occupation CEO	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000		
D. Full Name, Mailing Address and ZIP Code Timothy Rupli 1938 Great Falls Street McLean, VA 22101	Name of Employer R. Duffy Wall & Assoc. 601-13th St. #410 South Washington, DC 20005 Occupation Senior VP	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500		
E. Full Name, Mailing Address and ZIP Code Jennifer Schafer 217-10th Street, NE Washington, DC 20002	Name of Employer Cascade Associates 499 S. Capitol St, SW #520 Washington, DC 20003 Occupation Consultant	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $ 250
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 250		
F. Full Name, Mailing Address and ZIP Code R. Victor Sulkowski, Jr. 156 Adlin Avenue Houston, PA 15342-1059	Name of Employer Market Central Inc. 500 Business Center Dr. Pittsburgh, PA 15205 Occupation Engineer	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $ 250
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 250		
G. Full Name, Mailing Address and ZIP Code William Wight 8209 Langbrook Road Springfield, VA 22152	Name of Employer Bill Wight, LLC PO Box 25204 Arlington, VA 22202 Occupation See Supplement	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $ 500
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,500		
SUBTOTAL of Receipts This Page (optional)			$4,000
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 15 OF 15

FOR LINE NUMBER: 11a(i)

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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code

John Winkel
10036 Chartwell Manor Court
Potomac, MD 20854

Name of Employer

Occupation: Retired

Date (month, day, year): 12/28/99

Amount of Each Receipt this Period: $1,000

Aggregate Year-to-Date > $ 2,000

Receipt For: ☐ Primary ☒ General ☐ Other (specify):

B. Full Name, Mailing Address and ZIP Code

VOID

Name of Employer

Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Aggregate Year-to-Date > $

Receipt For: ☐ Primary ☐ General ☐ Other (specify):

C. Full Name, Mailing Address and ZIP Code

VOID

Name of Employer

Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Aggregate Year-to-Date > $

Receipt For: ☐ Primary ☐ General ☐ Other (specify):

D. Full Name, Mailing Address and ZIP Code

VOID

Name of Employer

Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Aggregate Year-to-Date > $

Receipt For: ☐ Primary ☐ General ☐ Other (specify):

E. Full Name, Mailing Address and ZIP Code

VOID

Name of Employer

Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Aggregate Year-to-Date > $

Receipt For: ☐ Primary ☐ General ☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

VOID

Name of Employer

Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Aggregate Year-to-Date > $

Receipt For: ☐ Primary ☐ General ☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

VOID

Name of Employer

Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Aggregate Year-to-Date > $

Receipt For: ☐ Primary ☐ General ☐ Other (specify):

SUBTOTAL of Receipts This Page (optional) ..... $ 1,000

TOTAL This Period (last page this line number only) $53,825

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 12

FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code AFSCME 1625 L Street, NW Washington, DC 20036		7/27/99	$5,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 5,000		
B. Full Name, Mailing Address and ZIP Code ATLA PAC 1050-31st Street, NW Washington, DC 20007	Name of Employer	7/27/99	$2,500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 5,000		
C. Full Name, Mailing Address and ZIP Code Int'l Assoc. of Fire Fighters 1750 New York Avenue, NW Washington, DC 20006	Name of Employer	7/27/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $1,000		
D. Full Name, Mailing Address and ZIP Code Int'l Union of Electrical Workers 1126-16th Street, NW Washington, DC 20036	Name of Employer	7/27/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 2,000		
E. Full Name, Mailing Address and ZIP Code Laborer's Political League 905-16th Street, NW Washington, DC 20006	Name of Employer	7/27/99	$2,500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 2,500		
F. Full Name, Mailing Address and ZIP Code Oshkosh Truck Corp. PAC 2307 Oregon Street Oshkosh, WI 54903-2566	Name of Employer	7/27/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 500		
G. Full Name, Mailing Address and ZIP Code PECO Energy Company PAC 2301 Market Street Philadelphia, PA 19103-1338	Name of Employer	7/27/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 1,000		

SUBTOTAL of Receipts This Page (optional) > $13,500

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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FOR LINE NUMBER 11c

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)

Martha for Congress Committee

A. Full Name, Mailing Address and ZIP Code
Raytheon PAC
141 Spring Street
Lexington, MA 02421

Name of Employer | Date (month, day, year): 7/27/99 | Amount of Each Receipt this Period: $2,000

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $ 2,000

B. Full Name, Mailing Address and ZIP Code
Textron Inc. PAC
PO Box 878
Providence, RI 02901

Name of Employer | Date (month, day, year): 7/27/99 | Amount of Each Receipt this Period: $2,500

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $ 2,500

C. Full Name, Mailing Address and ZIP Code
The Timken Co. CCF
1835 Dueber Avenue, SW
Canton, OH 44706

Name of Employer | Date (month, day, year): 7/27/99 | Amount of Each Receipt this Period: $ 500

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $ 500

D. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period

Occupation

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

E. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period

Occupation

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

F. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period

Occupation

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

G. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period

Occupation

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

SUBTOTAL of Receipts This Page (optional) $5,000

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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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)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
National Right to Life Pol. Act. Comm. Suite 500, 419 7th St., N.W. Washington, DC 20004		8/30/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	$1,000
TOTAL This Period (last page this line number only)	

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SCHEDULE A*

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11c

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)

Murtha for Congress Committee

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code BUILD PAC 1201-15th Street, NW Washington, DC 20005-2800		9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $1,000		
B. Full Name, Mailing Address and ZIP Code Citizens for Responsible Gov't PO Box 4078 Butte, MT 59701	Name of Employer	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $1,000		
C. Full Name, Mailing Address and ZIP Code Coltec Industries Voluntary PAC 1730 M Street, Suite 911 Washington, DC 20036	Name of Employer	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $1,000		
D. Full Name, Mailing Address and ZIP Code Condor Systems PAC 2133 Samaritan Drive San Jose, CA 95124	Name of Employer	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 1,000		
E. Full Name, Mailing Address and ZIP Code Cubic Corp. PAC 9333 Balboa Avenue San Diego, CA 92123	Name of Employer	9/22/99	$2,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 4,000		
F. Full Name, Mailing Address and ZIP Code General Atomics PAC PO Box 22930 San Diego, CA 92122	Name of Employer	9/22/99	$4,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 5,000		
G. Full Name, Mailing Address and ZIP Code General Dynamics VPCP 3190 Fairview Park Drive Falls Church, VA 22042-4523	Name of Employer	9/22/99	$5,000
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 10,000		

SUBTOTAL of Receipts This Page (optional) $15,000

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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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Int'l Union of Electronic Workers CPE 1126-16th Street, NW Washington, DC 20036		9/22/99	$2,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 4,000		
B. Full Name, Mailing Address and ZIP Code Marconi USA PAC 1215 Jefferson Davis Hwy. #1109 Arlington, VA 22202	Name of Employer	9/22/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 1,500		
C. Full Name, Mailing Address and ZIP Code Spectrum Healthcare Services PAC PO Box 419052 St. Louis, MO 63141-9052	Name of Employer	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 1,000		
D. Full Name, Mailing Address and ZIP Code Textron PAC PO Box 878 Providence, RI 02901	Name of Employer	9/22/99	$2,500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 5,000		
E. Full Name, Mailing Address and ZIP Code Transportation Pol. Ed. League 14600 Detroit Avenue Cleveland, OH 44107	Name of Employer	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 1,000		
F. Full Name, Mailing Address and ZIP Code United States Marine Repair PAC PO Box 13308 San Diego, CA 92113	Name of Employer	9/22/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 1,000		
G. Full Name, Mailing Address and ZIP Code VOID	Name of Employer		
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) . . . . . $ 8,000

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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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)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code
COLCPE-Committee on Letter Carriers Political Education
100 Indiana Avenue, NW
Washington, DC 20001-2144

Name of Employer | Date (month, day, year): 10/27/99 | Amount of Each Receipt this Period: $1,000

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $1,000

B. Full Name, Mailing Address and ZIP Code
Foundation Health Federal Services Political Action Committee
2025 Aerojet Drive
Rancho Cordova, CA 95742

Name of Employer | Date (month, day, year): 10/27/99 | Amount of Each Receipt this Period: $1,000

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $1,000

C. Full Name, Mailing Address and ZIP Code
General Electric Company PAC
1299 PA Avenue, NW #1100
Washington, DC 20004-2407

Name of Employer | Date (month, day, year): 10/27/99 | Amount of Each Receipt this Period: $1,000

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $2,000

D. Full Name, Mailing Address and ZIP Code
UNITE Campaign Committee
1710 Broadway
New York, NY 10019

Name of Employer | Date (month, day, year): 10/27/99 | Amount of Each Receipt this Period: $1,000

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $1,000

E. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period

Occupation

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

F. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period

Occupation

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

G. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period

Occupation

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

TOTAL of Receipts This Page (optional) $4,000

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 7 OF 12 | FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code American Fed. of Teachers Comm. of Political Education 555 New Jersey Avenue, NW Washington, DC 20001 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 500	12/28/99	$ 500
B. Full Name, Mailing Address and ZIP Code American Trucking PAC 430 First Street, SE Washington, DC 20003 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $1,500	12/28/99	$ 500
C. Full Name, Mailing Address and ZIP Code ATLA PAC 1050-31st Street, NW Washington, DC 20007 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $6,000	12/28/99	$1,000
D. Full Name, Mailing Address and ZIP Code Autometric, Inc. PAC 7700 Boston Blvd. Springfield, VA 22153 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 1,000	12/28/99	$1,000
E. Full Name, Mailing Address and ZIP Code Bethlehem Steel Good Gov't Comm. 1667 K Street, NW #550 Washington, DC 20006 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 2,000	12/28/99	$1,000
F. Full Name, Mailing Address and ZIP Code Citizens For Responsible Gov't (MSE) PO Box 4078 Butte, MT 59701 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $2,000	12/28/99	$1,000
G. Full Name, Mailing Address and ZIP Code Consolidated Natural Gas Service Executive Political Fund (CONPAC) CNG Tower 625 Liberty Avenue Pittsburgh, PA 15222 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 1,000	12/28/99	$1,000

SUBTOTAL of Receipts This Page (optional) $6,000

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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NAME OF COMMITTEE (In Full)

Murtha For Congress Committee

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Crown Cork & Seal Co. PAC 1 Crown Way Philadelphia, PA 19114-8290		12/28/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $1,000		
B. Full Name, Mailing Address and ZIP Code VOID	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code General Electric Co. PAC 1299 PA Avenue, NW #1100 Washington, DC 20004-2407	Name of Employer	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 3,000		
D. Full Name, Mailing Address and ZIP Code Ironworkers PAL 1750 New York Avenue, NW Washington, DC 20006	Name of Employer	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 2,000		
E. Full Name, Mailing Address and ZIP Code Litton Employees PAC 21240 Burbank Blvd. Woodland Hills, CA 91367	Name of Employer	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 2,000		
F. Full Name, Mailing Address and ZIP Code Loral Spacecom Civic Resp. Fund 1755 Jefferson Davis Hwy. #1007 Arlington, VA 22202	Name of Employer	Date (month, day, year) 12/28/99 12/28/99	Amount of Each Receipt this Period $1,000 P & $1,000 P
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 2,000		
G. Full Name, Mailing Address and ZIP Code Machinists Non-Partisan Pl 9000 Machinists Pl. Upper Marlboro, MD 20772	Name of Employer	Date (month, day, year) 12/28/99	Amount of Each Receipt this Period $3,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 5,000		

SUBTOTAL of Receipts This Page (optional) $9,000

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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FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Marconi USA PAC 1215 Jefferson Davis HWY #1109 Arlington, VA 22202		12/28/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 2,500		
B. Full Name, Mailing Address and ZIP Code Motorola Civic Action Campaign Fund 1350 I Street, NW #400 Washington, DC 20005	Name of Employer	12/28/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 1,000		
C. Full Name, Mailing Address and ZIP Code NAUS-PAC 5535 Hempstead Way Springfield, VA 22151	Name of Employer	12/28/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $3,000		
D. Full Name, Mailing Address and ZIP Code NEA Fund for Children & Public Education 1201-16th Street, NW #421 Washington, DC 20036	Name of Employer	12/28/99	$2,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 2,000		
E. Full Name, Mailing Address and ZIP Code NFG FEDPAC 10 LaFayette Square Buffalo, NY 14203	Name of Employer	12/28/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $1,000		
F. Full Name, Mailing Address and ZIP Code NSA STONEPAC 1415 Elliot Place, NW Washington, DC 20007	Name of Employer	12/28/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 2,000		
G. Full Name, Mailing Address and ZIP Code Oshkosh Truck Corp. PAC 2307 Oregon Street, Box 2566 Oshkosh, WI 54903-2566	Name of Employer	12/28/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 1,500		
SUBTOTAL of Receipts This Page (optional)			$8,000
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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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Peco Energy Co. PAC 2301 Market Street S-13-1 Philadelphia, PA 19103-1338		12/28/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $2,000		
B. Full Name, Mailing Address and ZIP Code Prostate Cancer Research PAC 212 N. Sangamon Street, No. 1A Chicago, IL 60607-1711		12/28/99	$2,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 2,000		
C. Full Name, Mailing Address and ZIP Code R. Duffy Wall & Assoc. PAC 601-13th Street, NW #410 Washington, DC 20005		12/28/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $1,500		
D. Full Name, Mailing Address and ZIP Code Raytheon PAC 141 Spring Street Lexington, MA 02421		12/28/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 3,000		
E. Full Name, Mailing Address and ZIP Code Reed Smith PAC 1301 K Street, NW East Tower Suite 1100 Washington, DC 20005-3317		12/28/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000		
F. Full Name, Mailing Address and ZIP Code Responsible Citizens Political League 3 Research Place Rockville, MD 20850		12/28/99	$ 500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000		
G. Full Name, Mailing Address and ZIP Code Rockwell Int'l Good Gov't Comm. 1020 N. Fairfax Street, 5th Floor Alexandria, VA 22314		12/28/99	$ 500
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500		

SUBTOTAL of Receipts This Page (optional) $6,500

TOTAL This Period (last page this line number only)

SCHEDULE A

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code
Rolls-Royce North America PAC
PO Box 420, Speed Code U28A
Indianapolis, IN 46206-0420

Name of Employer | Date (month, day, year) 12/28/99 | Amount of Each Receipt this Period $1,000

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $1,000

B. Full Name, Mailing Address and ZIP Code
SAIC Voluntary PAC
10260 Campus Point Drive F2
San Diego, CA 92121

Name of Employer | Date (month, day, year) 12/28/99 | Amount of Each Receipt this Period $1,000

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $5,000

C. Full Name, Mailing Address and ZIP Code
Seafarers Political Activity
5201 Auth Way
Camp Springs, MD 20746

Name of Employer | Date (month, day, year) 12/28/99 | Amount of Each Receipt this Period $1,000

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $2,000

D. Full Name, Mailing Address and ZIP Code
SUN PAC
1801 Market Street-10 PennCenter
Philadelphia, PA 19103

Name of Employer | Date (month, day, year) 12/28/99 | Amount of Each Receipt this Period $1,000

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $1,000

E. Full Name, Mailing Address and ZIP Code
Textron Inc. PAC
PO Box 878
Providence, RI 02901

Name of Employer | Date (month, day, year) 12/28/99 | Amount of Each Receipt this Period $5,000

Occupation

Receipt For: [ ] Primary [X] General [ ] Other (specify):

Aggregate Year-to-Date > $10,000

F. Full Name, Mailing Address and ZIP Code
Thelen Reid & Priest LLP PAC
701-PA Avenue, NW #800
Washington, DC 20004

Name of Employer | Date (month, day, year) 12/28/99 | Amount of Each Receipt this Period $1,000

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $1,000

G. Full Name, Mailing Address and ZIP Code
Transportation Trades Dept. AFL-CIO PAC
1000 Vermont Avenue, NW #900
Washington, DC 20005

Name of Employer | Date (month, day, year) 12/28/99 | Amount of Each Receipt this Period $ 500

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $ 500

SUBTOTAL of Receipts This Page (optional) $10,500

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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FOR LINE NUMBER 11c

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)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code
Union Pacific Corp. Fund for Eff. Gov't
600-13th Street, NW #340
Washington, DC 20005

Name of Employer | Date (month, day, year): 12/28/99 | Amount of Each Receipt this Period: $1,000

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $1,000

B. Full Name, Mailing Address and ZIP Code
United Defense Employees PAC
1525 Wilson Blvd. #700
Arlington, VA 22209

Name of Employer | Date (month, day, year): 12/28/99 | Amount of Each Receipt this Period: $1,000

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $2,000

C. Full Name, Mailing Address and ZIP Code
United Mine Workers of America COMPAC
900-15th Street, NW
Washington, DC 20005

Name of Employer | Date (month, day, year): 12/28/99 | Amount of Each Receipt this Period: $1,000

Occupation

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $1,000

D. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer | Date (month, day, year): | Amount of Each Receipt this Period:

Occupation

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

E. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer | Date (month, day, year): | Amount of Each Receipt this Period:

Occupation

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

F. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer | Date (month, day, year): | Amount of Each Receipt this Period:

Occupation

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

G. Full Name, Mailing Address and ZIP Code
VOID

Name of Employer | Date (month, day, year): | Amount of Each Receipt this Period:

Occupation

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

SUBTOTAL of Receipts This Page (optional) > $ 3,000

TOTAL This Period (last page this line number only) > $89,500

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 / 3

FOR LINE NUMBER 14

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code MBNA America Business Card P. O. Box 15546 Wilmington, DE 19850 Receipt For: [X] Primary 2000 [ ] General [ ] Other (specify):	Name of Employer Refund - Fund Raiser Recp. Expense Occupation Aggregate Year-to-Date > $	Date (month, day, year) 9/09/99	Amount of Each Receipt this Period 107.84
B. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)			107.84
TOTAL This Period (last page this line number only)			

FE7AN069

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 / 3

FOR LINE NUMBER 14

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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
CAMBRIA TWP. SUPERVISORS c/o SUSAN EVANS 509 MUNICIPAL ROAD EBENSBURG, PA 15931	REFUND-IN-KIND CONTRI. FOR PARK RENTAL-APPRECIATION PICNIC-FRIENDS OF TED & SUSAN TED BARANIK SUSAN EVANS 509 MUNICIPAL ROAD EBENSBURG, PA 15931	10/27/99	60.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	

FE7AN048

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 3

FOR LINE NUMBER 14

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code COMMUNITY FOUNDATION 216 FRANKLIN STREET, SUITE 606 JOHNSTOWN, PA 15901	Name of Employer 7-9-98 CHECK VOIDED NEVER CASHED - CONTRI.	Date (month, day, year) 12/31/99	Amount of Each Receipt this Period 200.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $	
B. Full Name, Mailing Address and ZIP Code AT&T WIRELESS P. O. BOX 8220 AURORA, IL 60572-8220	Name of Employer 3-31-99 CHECK VOIDED NEVER CASHED TELEPHONE	Date (month, day, year) 12/31/99	Amount of Each Receipt this Period 26.33
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $	
C. Full Name, Mailing Address and ZIP Code PINK RIBBONS PROJECT P. O. BOX 114 INDIANA, PA 15701	Name of Employer 7-29-99 CHECK VOIDED NEVER CASHED CONTRIBUTION	Date (month, day, year) 12/31/99	Amount of Each Receipt this Period 50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $	
D. Full Name, Mailing Address and ZIP Code VARIOUS CAMPAIGN WORKERS 9 X $5.00 8 X $10.00	Name of Employer 11-3-98 CHECKS VOIDED NEVER CASHED POLL WATCHERS & WORKERS	Date (month, day, year) 12/31/99	Amount of Each Receipt this Period 100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $	
E. Full Name, Mailing Address and ZIP Code VOID	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $	
F. Full Name, Mailing Address and ZIP Code VOID	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $	
G. Full Name, Mailing Address and ZIP Code VOID	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $	

SUBTOTAL of Receipts This Page (optional)	376.33
TOTAL This Period (last page this line number only)	544.17

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 3

FOR LINE NUMBER 15

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laurel Bank 534 Main Street Johnstown, PA 15901	Interest Interest Interest	7/30/99 8/31/99 9/30/99	110.70 118.18 110.89
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID	Occupation		
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID	Occupation		
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID	Occupation		
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID	Occupation		
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID	Occupation		
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID	Occupation		
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	339.77
TOTAL This Period (last page this line number only)	

FE7AN049

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 3

FOR LINE NUMBER 15

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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code

LAUREL BANK
534 MAIN STREET
JOHNSTOWN, PA 15901

Name of Employer: INTEREST

Occupation:

Date (month, day, year): 10/29/99

Amount of Each Receipt this Period: 107.28

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

B. Full Name, Mailing Address and ZIP Code

VOID

Name of Employer:

Occupation:

Date (month, day, year):

Amount of Each Receipt this Period:

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

C. Full Name, Mailing Address and ZIP Code

VOID

Name of Employer:

Occupation:

Date (month, day, year):

Amount of Each Receipt this Period:

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

D. Full Name, Mailing Address and ZIP Code

VOID

Name of Employer:

Occupation:

Date (month, day, year):

Amount of Each Receipt this Period:

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

E. Full Name, Mailing Address and ZIP Code

VOID

Name of Employer:

Occupation:

Date (month, day, year):

Amount of Each Receipt this Period:

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

F. Full Name, Mailing Address and ZIP Code

VOID

Name of Employer:

Occupation:

Date (month, day, year):

Amount of Each Receipt this Period:

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

G. Full Name, Mailing Address and ZIP Code

VOID

Name of Employer:

Occupation:

Date (month, day, year):

Amount of Each Receipt this Period:

Receipt For: [ ] Primary [ ] General [ ] Other (specify):

Aggregate Year-to-Date > $

SUBTOTAL of Receipts This Page (optional) 107.28

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 3 OF 3

FOR LINE NUMBER 15

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LAUREL BANK 534 MAIN STREET JOHNSTOWN, PA 15901	INTEREST INTEREST	11/30/99 12/31/99	118.48 103.37
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	221.85
TOTAL This Period (last page this line number only)	668.90

FE7AN040

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 33

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)
MURTHA FOR CONGRESS COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code LAUREL BANK 534 MAIN STREET JOHNSTOWN, PA 15901	PAYROLL TAXES PAYROLL TAXES PAYROLL TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/08/99 8/05/99 9/09/99	800.25 549.04 672.16
B. Full Name, Mailing Address and ZIP Code LAUREL BANK 534 MAIN STREET JOHNSTOWN, PA 15901	PAYROLL TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/07/99	814.19
C. Full Name, Mailing Address and ZIP Code JOSEPH SCHATZDORFER 633 WOOD STREET JOHNSTOWN, PA 15902	Purpose of Disbursement WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/08/99 7/15/99 7/22/99	Amount of Each Disbursement This Period 38.35 31.56 38.35
D. Full Name, Mailing Address and ZIP Code JOSEPH SCHATZDORFER 633 WOOD STREET JOHNSTOWN, PA 15902	Purpose of Disbursement WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/29/99 8/05/99 8/12/99	Amount of Each Disbursement This Period 40.64 40.64 40.64
E. Full Name, Mailing Address and ZIP Code JOSEPH SCHATZDORFER 633 WOOD STREET JOHNSTOWN, PA 15902	Purpose of Disbursement WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8/19/99 8/26/99 8/31/99	Amount of Each Disbursement This Period 42.91 40.66 40.64
F. Full Name, Mailing Address and ZIP Code JOSEPH SCHATZDORFER 633 WOOD STREET JOHNSTOWN, PA 15902	Purpose of Disbursement WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/09/99 9/16/99 9/23/99	Amount of Each Disbursement This Period 40.56 38.30 45.12
G. Full Name, Mailing Address and ZIP Code JOSEPH SCHATZDORFER 633 WOOD STREET JOHNSTOWN, PA 15902	Purpose of Disbursement WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/30/99 10/07/99 10/14/99	Amount of Each Disbursement This Period 42.85 47.39 40.64
H. Full Name, Mailing Address and ZIP Code ROBERT C. ONDICK, CPA, P.C. SUITE 220, BT FINANCIAL PLAZA 551 MAIN STREET JOHNSTOWN, PA 15901	Purpose of Disbursement ACCOUNTING SERVICES ACCOUNTING SERVICES ACCOUNTING SERVICES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/08/99 8/05/99 9/09/99	Amount of Each Disbursement This Period 1,300.00 1,300.00 1,300.00
I. Full Name, Mailing Address and ZIP Code ROBERT C. ONDICK, CPA, P.C. SUITE 220, BT FINANCIAL PLAZA 551 MAIN STREET JOHNSTOWN, PA 15901	Purpose of Disbursement ACCOUNTING SERVICES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/07/99	Amount of Each Disbursement This Period 1,300.00

SUBTOTAL of Disbursements This Page (optional)	8,644.89
TOTAL This Period (last page this line number only)	

FE7AND48

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 33

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MBNA AMERICA BUSINESS CARD FOR THE P. O. BOX 15469 FOLLOWING WILMINGTON, DE 19886-5469	CHECK DATED 7/8/99 $3,411.41 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B. Full Name, Mailing Address and ZIP Code TEXACO, INC. ARLINGTON, VA SHEETZ, INC. JOHNSTOWN, PA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/26/99 4/28/99	Amount of Each Disbursement This Period 19.30 9.80
C. Full Name, Mailing Address and ZIP Code EXXON USA JOHNSTOWN, PA EXXON USA JOHNSTOWN, PA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/30/99 5/06/99	Amount of Each Disbursement This Period 11.00 10.60
D. Full Name, Mailing Address and ZIP Code EXXON USA JOHNSTOWN, PA EXXON POS 91 ARLINGTON, VA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/16/99 5/21/99	Amount of Each Disbursement This Period 12.00 11.19
E. Full Name, Mailing Address and ZIP Code EXXON POS 91 ARLINGTON, VA SHEETZ, INC. JOHNSTOWN, PA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/05/99 5/18/99	Amount of Each Disbursement This Period 9.11 13.74
F. Full Name, Mailing Address and ZIP Code EXXON POS 75 JOHNSTOWN, PA EXXON POS 75 JOHNSTOWN, PA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/20/99 5/21/99	Amount of Each Disbursement This Period 76.11 9.00
G. Full Name, Mailing Address and ZIP Code SHEETZ, INC. JOHNSTOWN, PA EXXON POS 75 JOHNSTOWN, PA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/21/99 5/26/99	Amount of Each Disbursement This Period 17.50 11.50
H. Full Name, Mailing Address and ZIP Code EXXON POS 75 JOHNSTOWN, PA PASSPORT CHRYSLER ALEXANDRIA, VA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/14/99 5/26/99	Amount of Each Disbursement This Period 11.00 70.54
I. Full Name, Mailing Address and ZIP Code EASYGRADE AUTO WASH JOHNSTOWN, PA RITZ CARLTON ARLINGTON, VA	Purpose of Disbursement TRAVEL FUND RAISER RECP. EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/04/99 5/29/99	Amount of Each Disbursement This Period 12.00 4,536.94

SUBTOTAL of Disbursements This Page (optional)	4,841.33
TOTAL This Period (last page this line number only)	

FE7AN043

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 33

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MBNA AMERICA BUSINESS CARD FOR THE P. O. BOX 15469 FOLLOWING WILMINGTON, DE 19886-5469 CONTINUED	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B. Full Name, Mailing Address and ZIP Code GRAND CONCOURSE PITTSBURGH PA EL RANCHO STEAKHOUSE JOHNSTOWN, PA	Purpose of Disbursement MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/23/99 5/17/99	Amount of Each Disbursement This Period 40.89 12.10
C. Full Name, Mailing Address and ZIP Code THE BOULEVARD GRILL JOHNSTOWN, PA HOSS'S JOHNSTOWN, PA	Purpose of Disbursement MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/01/99 6/15/99	Amount of Each Disbursement This Period 9.89 15.12
D. Full Name, Mailing Address and ZIP Code WOOD MARKET, LTD. LAUREL, MD AMERICAN TULSA, OK	Purpose of Disbursement GIFTS-(REFUND) TRAVEL-(REFUND) Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/07/99 5/17/99	Amount of Each Disbursement This Period (885.92) (622.00)
E. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	(1,429.92)
TOTAL This Period (last page this line number only)	

FE7AN049

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MBNA AMERICA BUSINESS CARD FOR THE P. O. BOX 15469 FOLLOWING: WILMINGTON, DE 19886-5469	CHECK DATED 7/29/99 $409.27 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
EL RANCHO STEAKHOUSE JOHNSTOWN, PA EL RANCHO STEAKHOUSE JOHNSTOWN, PA	MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/09/99 6/13/99	11.93 28.34
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. HOUSE-MEMBERS DIN WASHINGTON, DC LINO'S RESTAURANT JOHNSTOWN, PA	MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/23/99 6/26/99	42.85 94.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CHEZ ANDREE RESTAURANT ALEXANDRIA, VA U. S. HOUSE -MEMBERS DIN WASHINGTON, DC	MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/03/99 7/14/99	116.59 20.90
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
EXXON POS 91 ARLINGTON, VA EXXON POS 91 ARLINGTON, VA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/21/99 6/29/99	17.30 15.62
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
EXXON POS 75 JOHNSTOWN, PA MBNA WILMINGTON, DE	TRAVEL FINANCE CHARGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/28/99 7/16/99	12.00 49.74
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
VOID	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
VOID	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
VOID	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	409.27
TOTAL This Period (last page this line number only)	

FE7AN649

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 5 OF 33 | FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code MBNA AMERICA BUSINESS CARD FOR THE P. O. BOX 15469 FOLLOWING: WILMINGTON, DE 19886-5469	CHECK DATED 8/31/99 $2,854.38 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B. Full Name, Mailing Address and ZIP Code UNITED MI UNITED MI	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/13/99 7/13/99	614.80 1,808.20
C. Full Name, Mailing Address and ZIP Code EXXON POS 91 ARLINGTON, VA EXXON POS 91 ARLINGTON, VA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/19/99 7/28/99	14.34 13.66
D. Full Name, Mailing Address and ZIP Code SUNOCO HAGERSTOWN, MD SUNOCO HAGERSTOWN, MD	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/07/99 8/07/99	.05 16.85
E. Full Name, Mailing Address and ZIP Code BP OIL DONEGAL, PA EASYGRADE AUTO WASH JOHNSTOWN, PA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/16/99 7/15/99	16.40 12.00
F. Full Name, Mailing Address and ZIP Code EASYGRADE AUTO WASH JOHNSTOWN, PA EASYGRADE AUTO WASH JOHNSTOWN, PA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/23/99 8/07/99	12.00 12.00
G. Full Name, Mailing Address and ZIP Code EASYGRADE AUTO WASH JOHNSTOWN, PA EASYGRADE AUTO WASH JOHNSTOWN, PA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/09/99 8/09/99	12.00 12.00
H. Full Name, Mailing Address and ZIP Code EL RANCHO STEAKHOUSE JOHNSTOWN, PA HOSS'S JOHNSTOWN, PA	MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/18/99 7/24/99	22.88 27.64
I. Full Name, Mailing Address and ZIP Code THE INN AT GEORGIAN PLACE SOMERSET, PA PINE GRILL, INC. SOMERSET, PA	MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/24/99 8/11/99	75.31 18.72

SUBTOTAL of Disbursements This Page (optional) 2,688.85

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

FE7AN048

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MBNA AMERICA BUSINESS CARD FOR THE P. O. BOX 15469 FOLLOWING WILMINGTON, DE 19886-5469 CONTINUED	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B. Full Name, Mailing Address and ZIP Code THE SMOKEHOUSE CONFLUENCE, PA RAMADA MYRONS REST. SOMERSET, PA	Purpose of Disbursement MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8/13/99 8/12/99	Amount of Each Disbursement This Period 18.58 90.64
C. Full Name, Mailing Address and ZIP Code U. S. HOUSE-MEMBERS DIN WASHINGTON, DC MBNA WILMINGTON, DE	Purpose of Disbursement MEETING EXPENSE FINANCE CHARGE-(REFUND) Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/29/99	Amount of Each Disbursement This Period 106.05 (49.74)
D. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 165.53

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

FE7ANG49

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MBNA AMERICA BUSINESS CARD FOR THE P. O. BOX 15469 FOLLOWING: WILMINGTON, DE 19886-5469	CHECK DATED 10/7/99 $7,780.31 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B. Full Name, Mailing Address and ZIP Code EASYGRADE AUTO WASH JOHNSTOWN, PA EASYGRADE AUTO WASH JOHNSTOWN, PA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8/17/99 8/26/99	Amount of Each Disbursement This Period 12.00 12.00
C. Full Name, Mailing Address and ZIP Code EASYGRADE AUTO WASH JOHNSTOWN, PA EASYGRADE AUTO WASH JOHNSTOWN, PA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/03/99 9/02/99	Amount of Each Disbursement This Period 13.00 13.00
D. Full Name, Mailing Address and ZIP Code TEXACO, INC. ARLINGTON, VA EXXON POS 91 ARLINGTON, VA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8/30/99 9/12/99	Amount of Each Disbursement This Period 11.10 16.85
E. Full Name, Mailing Address and ZIP Code FOUR SEASONS CARLSBAD, CA FOUR SEASONS CARLSBAD, CA	Purpose of Disbursement LODGING FUND RAISER RECP. EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8/30/99 9/02/99	Amount of Each Disbursement This Period 1,447.72 5,827.92
F. Full Name, Mailing Address and ZIP Code HOLIDAY INNS JOHNSTOWN, PA HOLIDAY INNS JOHNSTOWN, PA	Purpose of Disbursement MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/01/99 9/12/99	Amount of Each Disbursement This Period 18.02 10.96
G. Full Name, Mailing Address and ZIP Code THE BOULEVARD GRILL JOHNSTOWN, PA EAT N PARK RESTR JOHNSTOWN, PA	Purpose of Disbursement MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/15/99 9/18/99	Amount of Each Disbursement This Period 17.07 14.88
H. Full Name, Mailing Address and ZIP Code FOUR SEASONS CARLSBAD, CA JAKE'S DEL MAR, CA	Purpose of Disbursement MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8/29/99 8/29/99	Amount of Each Disbursement This Period 84.12 67.54
I. Full Name, Mailing Address and ZIP Code FOUR SEASONS CARLSBAD, CA WINGS RESTAURANT JOHNSTOWN, PA	Purpose of Disbursement MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8/31/99 9/03/99	Amount of Each Disbursement This Period 13.20 32.88

SUBTOTAL of Disbursements This Page (optional) 7,612.26

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MBNA AMERICA BUSINESS CARD FOR THE P. O. BOX 15469 FOLLOWING: WILMINGTON, DE 19886-5469 CONTINUED:	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B. Full Name, Mailing Address and ZIP Code STAPLES ALEXANDRIA, VA AMES DEPT. STORE JOHNSTOWN, PA	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/16/99 9/15/99	Amount of Each Disbursement This Period 83.58 84.47
C. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	168.05
TOTAL This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. PENN NATIONAL INSURANCE P. O. BOX 2361 HARRISBURG, PA 17105	AUTO INS. AUTO INS.	7/08/99 10/07/99	434.00 434.00
B. POSTMASTER JOHNSTOWN, PA	POSTAGE POSTAGE POSTAGE	7/08/99 8/05/99 8/26/99	396.00 330.00 330.00
C. POSTMASTER JOHNSTOWN, PA	POSTAGE BOX RENT POSTAGE	9/30/99 10/14/99 10/14/99	165.00 22.00 99.00
D. JOHNSTOWN REDEVELOPMENT AUTH. 4TH FLOOR-PUBLIC SAFETY BUILDING JOHNSTOWN, PA 15901	RENT RENT RENT	7/08/99 8/05/99 9/23/99	660.00 660.00 660.00
E. JOHNSTOWN REDEVELOPMENT AUTH. 4TH FLOOR-PUBLIC SAFETY BUILDING JOHNSTOWN, PA 15901	RENT	10/07/99	660.00
F. GOLD KEY LEASE 300 OXFORD DRIVE, SUITE 310 MONROEVILLE, PA 15146	VEHICLE RENTAL VEHICLE RENTAL	7/08/99 8/12/99	603.30 603.30
G. GOLD KEY LEASE 300 OXFORD DRIVE, SUITE 310 MONROEVILLE, PA 15146	VEHICLE RENTAL VEHICLE RENTAL	9/09/99 10/07/99	603.30 603.30
H. WESTMONT MOBIL 1735 GOUCHER STREET JOHNSTOWN, PA 15905	TRAVEL-GASOLINE TRAVEL-GASOLINE	7/08/99 8/12/99	44.50 50.50
I. WESTMONT MOBIL 1735 GOUCHER STREET JOHNSTOWN, PA 15905	TRAVEL-GASOLINE TRAVEL-GASOLINE	9/09/99 10/07/99	118.84 68.50

SUBTOTAL of Disbursements This Page (optional) 7,545.54

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. L & D CANDIES 404 MESSENGER STREET JOHNSTOWN, PA 15902	GIFTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/08/99	78.65
B. AT&T P. O. BOX 371430 PITTSBURGH, PA 15250-7430	TELEPHONE TELEPHONE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/08/99 8/05/99	112.13 87.31
C. AT&T P. O. BOX 371430 PITTSBURGH, PA 15250-7430	TELEPHONE TELEPHONE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/31/99 10/07/99	100.90 97.99
D. NORTHERN EXPRESS FLEET FUELING P. O. BOX 5478 JOHNSTOWN, PA 15904	TRAVEL-GASOLINE TRAVEL-GASOLINE TRAVEL-GASOLINE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/08/99 7/29/99 8/12/99	53.40 56.37 94.96
E. NORTHERN EXPRESS FLEET FUELING P. O. BOX 5478 JOHNSTOWN, PA 15904	TRAVEL-GASOLINE TRAVEL-GASOLINE TRAVEL-GASOLINE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/26/99 9/09/97 10/14/99	72.32 68.82 123.92
F. CASH JOHNSTOWN, PA	TRAVEL, VOL. EXPENSE & CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/08/99	77.76
G. CASH JOHNSTOWN, PA	TRAVEL, MEALS & CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/15/99	24.49
H. CASH JOHNSTOWN, PA	CAMPAIGN OFFICE SUPPLIES, TRAVEL & VOLUNTEER EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/12/99	82.83
I. CASH JOHNSTOWN, PA	POSTAGE & VOLUNTEER EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/26/99	48.27

SUBTOTAL of Disbursements This Page (optional) 1,180.12

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. CASH JOHNSTOWN, PA	MEETING EXP., VOLUNTEER EXP. & CAMPAIGN OFFICE SUPPLIES	9/09/99	43.62
B. CASH JOHNSTOWN, PA	CAMPAIGN OFFICE SUPPLIES & VOLUNTEER EXP.	10/07/99	79.88
C. MARY CATHERINE VOYTKO 920 FRONHEISER STREET JOHNSTOWN, PA 15902	WAGES WAGES WAGES	7/08/99 8/12/99 9/09/99	63.25 63.25 63.25
D. MARY CATHERINE VOYTKO 920 FRONHEISER STREET JOHNSTOWN, PA 15902	WAGES	10/07/99	63.25
E. AAABA c/o GEORGE ARCURIO, JR. 519 GROVE AVENUE JOHNSTOWN, PA 15902	CONTRI.	7/15/99	1,000.00
F. THERESA VOYTKO 920 FRONHEISER STREET JOHNSTOWN, PA 15902	WAGES WAGES WAGES	7/15/99 7/29/99 8/12/99	634.73 634.73 634.73
G. THERESA VOYTKO 920 FRONHEISER STREET JOHNSTOWN, PA 15902	WAGES WAGES WAGES	8/26/99 9/09/99 9/23/99	634.73 634.73 634.73
H. THERESA VOYTKO 920 FRONHEISER STREET JOHNSTOWN, PA 15902	WAGES	10/07/99	634.73
I. UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	FREIGHT FREIGHT FREIGHT	7/15/99 7/22/99 7/29/99	86.74 40.88 69.98

SUBTOTAL of Disbursements This Page (optional) 6,017.21

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	FREIGHT FREIGHT FREIGHT	8/05/99 8/12/99 8/19/99	35.75 65.50 35.75
B. UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	FREIGHT FREIGHT FREIGHT	8/26/99 8/31/99 9/09/99	29.43 39.35 77.75
C. UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	FREIGHT FREIGHT FREIGHT	9/16/99 9/23/99 9/30/99	56.50 28.00 36.00
D. UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	FREIGHT FREIGHT	10/07/99 10/14/99	102.37 123.01
E. SCHRADER FLOWER SHOP 510 VINE STREET JOHNSTOWN, PA 15901	FLORAL ARRANG.	7/15/99	50.40
F. GREATER JOHNSTOWN WATER AUTHORITY P. O. BOX 1287 JOHNSTOWN, PA 15907-1287	UTILITIES UTILITIES UTILITIES	7/15/99 8/12/99 9/09/99	2.75 2.75 2.75
G. GREATER JOHNSTOWN WATER AUTHORITY P. O. BOX 1287 JOHNSTOWN, PA 15907-1287	UTILITIES	10/14/99	2.75
H. CABLECOMM P. O. BOX 371464 PITTSBURGH, PA 15250-7464	UTILITIES UTILITIES UTILITIES	7/15/99 8/19/99 9/23/99	35.63 35.43 15.43
I. PA DEPT. OF REVENUE DEPT. 280415 HARRISBURG, PA 17128-0415	STATE 1/T W/H	7/22/99	173.13

SUBTOTAL of Disbursements This Page (optional) 950.43

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code PA UC FUND LABOR & INDUSTRY BUILDING SEVENTH & FORSTER STREETS P. O. BOX 68568 HARRISBURG, PA 17105-8568	PAYROLL TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/22/99	69.82
B. Full Name, Mailing Address and ZIP Code CENTRAL TAX BUREAU OF PA., INC. 1610 BEDFORD STREET JOHNSTOWN, PA 15902	LOCAL TAX W/H Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/22/99	80.39
C. Full Name, Mailing Address and ZIP Code BENSHOFF PRINTING 46 VALLEY PIKE JOHNSTOWN, PA 15905	CAMPAIGN OFFICE SUPPLIES ADVERTISING MATERIALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/22/99 10/07/99	357.22 442.02
D. Full Name, Mailing Address and ZIP Code CITY OF JOHNSTOWN - BUREAU OF SEWAGE P. O. BOX 608 JOHNSTOWN, PA 15907	UTILITIES UTILITIES UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/22/99 8/19/99 9/16/99	8.16 8.15 8.15
E. Full Name, Mailing Address and ZIP Code LEADER TIMES P. O. BOX 978 115-121 N. GRANT AVENUE KITTANNING, PA 16201	SUBSCRIPTION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/22/99	125.00
F. Full Name, Mailing Address and ZIP Code GTE NORTH P. O. BOX 31222 TAMPA, FL 33631-3222	TELEPHONE TELEPHONE TELEPHONE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/22/99 8/26/99 9/23/99	511.02 449.01 468.28
G. Full Name, Mailing Address and ZIP Code TRIBUNE REVIEW 622 CABIN HILL DRIVE GREENSBURG, PA 15601	SUBSCRIPTION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/22/99	119.60
H. Full Name, Mailing Address and ZIP Code NATIONAL DEMOCRATIC CLUB 30 IVY STREET, S.E. WASHINGTON, DC 20003-4071	FUND RAISER RECP. EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/22/99	491.75
I. Full Name, Mailing Address and ZIP Code DAYLILY FLORAL & GIFT SHOP P. O. BOX 403 DAVIDSVILLE, PA 15928	FLORAL ARRANG. FLORAL ARRANG. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/22/99 9/16/99	37.10 42.40

SUBTOTAL of Disbursements This Page (optional) 3,218.07

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LIGONIER YMCA c/o ART BOYLE P. O. BOX 400 LAUGHLINTOWN, PA 15655	CONTRI. Disbursement for: Primary General Other (specify)	7/29/99	1,000.00
B. Full Name, Mailing Address and ZIP Code AT&T WIRELESS 2630 LIBERTY AVENUE PITTSBURGH, PA 15222	Purpose of Disbursement TELEPHONE TELEPHONE TELEPHONE Disbursement for: Primary General Other (specify)	Date (month, day, year) 7/29/99 8/31/99 10/07/99	Amount of Each Disbursement This Period 73.16 92.73 36.32
C. Full Name, Mailing Address and ZIP Code GPU ENERGY P. O. BOX 39 ALLENHURST, NJ 07709-0005	Purpose of Disbursement UTILITIES UTILITIES UTILITIES Disbursement for: Primary General Other (specify)	Date (month, day, year) 7/29/99 8/26/99 9/30/99	Amount of Each Disbursement This Period 116.18 119.93 165.12
D. Full Name, Mailing Address and ZIP Code JAMES OSWALD 949 CARNEGIE AVENUE JOHNSTOWN, PA 15905	Purpose of Disbursement MEALS & CAMPAIGN OFFICE SUPPLIES Disbursement for: Primary General Other (specify)	Date (month, day, year) 7/29/99	Amount of Each Disbursement This Period 40.23
E. Full Name, Mailing Address and ZIP Code JAMES OSWALD 949 CARNEGIE AVENUE JOHNSTOWN, PA 15905	Purpose of Disbursement MEALS & CAMPAIGN OFFICE SUPPLIES Disbursement for: Primary General Other (specify)	Date (month, day, year) 8/26/99	Amount of Each Disbursement This Period 89.68
F. Full Name, Mailing Address and ZIP Code JAMES OSWALD 949 CARNEGIE AVENUE JOHNSTOWN, PA 15905	Purpose of Disbursement MEALS & CAMPAIGN OFFICE SUPPLIES Disbursement for: Primary General Other (specify)	Date (month, day, year) 9/16/99	Amount of Each Disbursement This Period 60.20
G. Full Name, Mailing Address and ZIP Code JAMES OSWALD 949 CARNEGIE AVENUE JOHNSTOWN, PA 15905	Purpose of Disbursement MEALS & CAMPAIGN OFFICE SUPPLIES Disbursement for: Primary General Other (specify)	Date (month, day, year) 10/14/99	Amount of Each Disbursement This Period 50.89
H. Full Name, Mailing Address and ZIP Code HERTZ 307 BEDFORD STREET JOHNSTOWN, PA 15901	Purpose of Disbursement TRAVEL Disbursement for: Primary General Other (specify)	Date (month, day, year) 7/29/99	Amount of Each Disbursement This Period 217.82
I. Full Name, Mailing Address and ZIP Code CHRYSLER FINANCIAL PAYMENT PROCESSING CENTER P. O. BOX 3208 MILWAUKEE, WI 53201-3028	Purpose of Disbursement VEHICLE RENTAL VEHICLE RENTAL Disbursement for: Primary General Other (specify)	Date (month, day, year) 7/29/99 8/26/99	Amount of Each Disbursement This Period 290.50 193.62

SUBTOTAL of Disbursements This Page (optional) 2,546.38

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code CHRYSLER FINANCIAL PAYMENT PROCESSING CENTER P. O. BOX 3208 MILWAUKEE, WI 53201-3028	VEHICLE RENTAL VEHICLE RENTAL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/23/99 9/30/99	209.50 81.00
B. Full Name, Mailing Address and ZIP Code BRIER GROUP 242 VASSAR AVENUE CLARKS GREEN, PA 18411	POLITICAL CONSULTING POLITICAL CONSULTING POLITICAL CONSULTING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/29/99 8/31/99 9/30/99	4,166.67 4,166.67 4,166.67
C. Full Name, Mailing Address and ZIP Code SUSAN O'NEILL & ASSOCIATES 5910 GLOSTER ROAD BETHESDA, MD 20816	PUBLIC RELATIONS EXP. PUBLIC RELATIONS EXP. PUBLIC RELATIONS EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/29/99 8/31/99 9/30/99	2,000.00 2,000.00 2,000.00
D. Full Name, Mailing Address and ZIP Code NATIONAL FINANCE CENTER DFES BILLING UNIT P. O. BOX 61760 NEW ORLEANS, LA 70161	EMPLOYEE BENEFITS-HOSP. EMPLOYEE BENEFITS-HOSP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/29/99 8/26/99	110.37 143.48
E. Full Name, Mailing Address and ZIP Code FEDERAL EXPRESS P. O. BOX 1140 MEMPHIS, TN 38101-1140	POSTAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/05/99	22.75
F. Full Name, Mailing Address and ZIP Code ASSOCIATED OFFICE EQUIPMENT P. O. BOX 151 TYRE HILL, PA 15959	CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/05/99	269.66
G. Full Name, Mailing Address and ZIP Code DARRYL'S DESIGNS 2552 WM. PENN AVENUE JOHNSTOWN, PA 15909	FLORAL ARRANGEMENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/05/99	44.52
H. Full Name, Mailing Address and ZIP Code NIESSNER'S 2227 BEDFORD STREET JOHNSTOWN, PA 15904	FLORAL ARRANGE. FLORAL ARRANGE. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/05/99 10/07/99	48.52 43.38
I. Full Name, Mailing Address and ZIP Code MARK GRITZ 825 HIGHLAND AVENUE JOHNSTOWN, PA 15902	WAGES WAGES TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/12/99 8/26/99 7/29/09	216.45 328.82 50.00

SUBTOTAL of Disbursements This Page (optional) 20,068.46

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code MARK CRITZ 825 HIGHLAND AVENUE JOHNSTOWN, PA 15902	WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/09/99 9/23/99 10/07/99	520.80 476.32 510.80
B. Full Name, Mailing Address and ZIP Code GIRL SCOUTS OF AMERICA 612 LOCUST STREET JOHNSTOWN, PA 15901	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/12/99	1,250.00
C. Full Name, Mailing Address and ZIP Code TRIBUNE DEMOCRAT 425 LOCUST STREET JOHNSTOWN, PA 15901	AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/12/99	99.00
D. Full Name, Mailing Address and ZIP Code JANWAY 11 ACADEMY ROAD COGAN STATION, PA 17728-9300	GIFTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/12/99	587.48
E. Full Name, Mailing Address and ZIP Code FAYETTE COUNTY BOARD OF ELECTIONS FAYETTE COUNTY PUBLIC SERVICE BLDG. 22 EAST MAIN STREET UNIONTOWN, PA 15401-3412	PHOTOCOPIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/19/99	6.00
F. Full Name, Mailing Address and ZIP Code ARCADIA THEATER 1418 GRAHAM AVENUE WINDBER, PA 15963	TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/19/99	64.00
G. Full Name, Mailing Address and ZIP Code B&B FLORAL 1240 SCALP AVENUE JOHNSTOWN, PA 15904	FLORAL ARRANG. FLORAL ARRANG. FLORAL ARRANG. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/19/99 8/31/99 10/14/99	45.40 45.60 72.10
H. Full Name, Mailing Address and ZIP Code LAUREL CHRYSLER 933 EISENHOWER BLVD. JOHNSTOWN, PA 15904	VEHICLE REPAIRS VEHICLE REPAIRS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/19/99 9/16/99	177.97 37.05
I. Full Name, Mailing Address and ZIP Code BEV'S FLORAL SHOPPE 65 FAIRFIELD AVENUE JOHNSTOWN, PA 15906	FLORAL ARRANG. FLORAL ARRANG. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/19/99 10/14/99	43.00 43.00

SUBTOTAL of Disbursements This Page (optional) 3,978.52

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. JOHNSTOWN SYMPHONY ORCHESTRA 227 FRANKLIN STREET JOHNSTOWN, PA 15901	TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/26/99	1,400.00
B. WESTMORELAND COUNTY AIRPORT 200 PLEASANT UNITY ROAD SUITE 103 LATROBE, PA 15650	AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/26/99	628.15
C. RIVER CITY BRASS BAND c/o ED KANE 1334 FRANKLIN STREET JOHNSTOWN, PA 15905	AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/26/99	100.00
D. THE NEW REPUBLIC P. O. BOX 239, 145 CENTER STREET MEYERSDALE, PA 15552	AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/26/99	55.00
E. FLOOD CITY INTERNET 100 EISENHOWER BLVD. JOHNSTOWN, PA 15905	INTERNET CHARGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/25/99	39.00
F. COMM. OF PA STATE WORKERS' INSURANCE FUND DEPT. OF LABOR & INDUSTRY 100 LACKAWANNA AVE., P. O. BOX 5100 SCRANTON, PA 18505	W. C. INSURANCE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/16/99	219.00
G. PITTSBURGH POST GAZETTE P. O. BOX 747012 PITTSBURGH, PA 15274-7012	SUBSCRIPTION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/16/99	320.00
H. INDIANA COUNTY MARINE CORPS LEAGUE 725 GOMPERS AVENUE INDIANA, PA 15701	AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/31/99	100.00
I. WHEELING EDUCATION & TRUST c/o THE TRUST DEPARTMENT UNITED STATES NATIONAL BANK P. O. BOX 320 JOHNSTOWN, PA 15907	TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/09/99	250.00

SUBTOTAL of Disbursements This Page (optional) 3,111.15

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. CONEMAUGH VALLEY FNRA c/o JOHN HECKMAN 170 MAYLUTH ROAD JOHNSTOWN, PA 15904	TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/09/99	125.00
B. FRIENDS OF NRA c/o PAUL HORNICK, JR. 316 BROAD STREET JOHNSTOWN, PA 15906	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/09/99	50.00
C. COMMUNITY CONCERT ASSOC. 157 VIOLET STREET JOHNSTOWN, PA 15905	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/23/99	50.00
D. JOHNSTOWN BRANCH NAACP c/o VEKKI KING 349 MOORE STREET JOHNSTOWN, PA 15901-1248	TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/30/99	30.00
E. UMWA UNEMPLOYMENT ASSISTANCE FUND 51 ELEVENTH ST., P. O. BOX 222 LUCERNEMINES, PA 15754	AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/30/99	50.00
F. COVER STUDIO 504 MAIN STREET JOHNSTOWN, PA 15901	PHOTOGRAPHY EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/07/99	153.75
G. LaPORTA'S 342 WASHINGTON STREET JOHNSTOWN, PA 15901	FLORAL ARRANG. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/07/99	45.40
H. FLORAL EXPRESSIONS 434 CENTRAL AVENUE JOHNSTOWN, PA 15902	FLORAL ARRANG. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/14/77	42.40
I. MARGARET HARRIS FLOWERS 19 SOUTH 7TH STREET INDIANA, PA 15701	FLORAL ARRANG. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/14/99	46.63

SUBTOTAL of Disbursements This Page (optional) 593.18

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
UNIVERSAL PRINTING 12 OLIVE STREET SCRANTON, PA 18508	AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/14/99	3,158.80
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
DAILY AMERICAN 334 WEST MAIN STREET P. O. BOX 638 SOMERSET, PA 15501-0638	AD AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/15/99 9/09/99	248.63 248.63
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
CONGRESSIONAL CLUB 2001 NEW HAMPSHIRE AVENUE WASHINGTON, DC 20009	GIFTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/30/99	504.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
VOID	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
VOID	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
VOID	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
VOID	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
VOID	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
VOID	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	4,160.06
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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
THERESA VOYTKO 920 FRONHEISER STREET JOHNSTOWN, PA 15902	WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99 11/04/99 11/18/99	634.73 634.73 634.73
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MARK CRITZ 822 HIGHLAND AVENUE JOHNSTOWN, PA 15902	WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99 11/04/99 11/18/99	520.80 520.80 476.32
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JOSEPH SCHATZDORFER 633 WOOD STREET JOHNSTOWN, PA 15902	WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99 10/27/99 11/04/99	36.09 38.35 40.64
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JOSEPH SCHATZDORFER 633 WOOD STREET JOHNSTOWN, PA 15902	WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/10/99 11/18/99	42.91 44.92
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ARCADIA THEATER 1418 GRAHAM AVENUE WINDBER, PA 15963	TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99	120.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CABLECOMM P. O. BOX 371464 PITTSBURGH, PA 15250-7464	UTILITIES UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99 11/18/99	34.03 35.44
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CITY OF JOHNSTOWN-BUREAU OF SEWAGE P. O. BOX 610 JOHNSTOWN, PA 15907	UTILITIES UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99 11/18/99	8.16 8.15
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CTE-NORTH P. O. BOX 31222 TAMPA, FL 33631-3222	TELEPHONE TELEPHONE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99 11/18/99	484.30 855.97
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
UNIVERSAL PRINTING CO. 12 OLIVE STREET SCRANTON, PA 18508	FUND RAISER RECP. EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99	558.62

SUBTOTAL of Disbursements This Page (optional) 5,729.69

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

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. LAUREL BANK 534 MAIN STREET JOHNSTOWN, PA 15901	PAYROLL TAXES PAYROLL TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99 11/04/99	91.58 835.23
B. PA. UC FUND LABOR & INDUSTRY BUILDING SEVENTH & FORSTER STREETS P. O. BOX 68568 HARRISBURG, PA 17106-8568	PAYROLL TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99	40.56
C. PA DEPT. OF REVENUE DEPT. 280415 HARRISBURG, PA 17128-0415	STATE I/T W/H Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99	218.95
D. CENTRAL TAX BUREAU OF PA., INC. 1610 BEDFORD STREET JOHNSTOWN, PA 15902	LOCAL TAX W/H Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99	101.66
E. MOM'S HOUSE 1325 FRANKLIN STREET JOHNSTOWN, PA 15905	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/99	100.00
F. UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	FREIGHT FREIGHT FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/99 11/04/99 11/10/99	68.88 43.64 46.40
G. UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/18/99	60.07
H. CHRYSLER FINANCIAL PAYMENT PROCESSING CENTER P. O. BOX 3208 MILWAUKEE, WI 53201-3208	VEHICLE RENTAL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/99	231.27
I. NORTHERN EXPRESS P. O. BOX 5478 JOHNSTOWN, PA 15904	TRAVEL-GASOLINE TRAVEL-GASOLINE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/99 11/10/99	207.60 95.45

SUBTOTAL of Disbursements This Page (optional) 2,041.29

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
IKON P. O. BOX 8500-1430 PHILADELPHIA, PA 19178	MAINTENANCE CONTRACT - COPIER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/99	425.56
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
GPU ENERGY P. O. BOX 391 ALLENHURST, NJ 07709-0005	UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/99	161.75
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BRIER GROUP 242 VASSAR AVENUE CLARKS GREEN, PA 18411	POLITICAL CONSULTING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/99	4,166.67
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SUSAN O'NEILL & ASSOC. 5910 GLOSTER ROAD BETHESDA, MD 20816	PUBLIC RELATIONS EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/99	2,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MARY CATHERINE VOYTKO 920 FRONHEISER ST. JOHNSTOWN, PA 15902	WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/04/99	63.25
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ROBERT C. ONDICK, CPA, P.C. BT FINANCIAL PLAZA - SUITE 220 551 MAIN STREET JOHNSTOWN, PA 15901	ACCOUNTING SERV. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/04/99	1,300.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT&T P. O. BOX 371430 PITTSBURGH, PA 15250-7430	TELEPHONE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/04/99	134.26
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT&T WIRELESS P. O. BOX 9001309 AURORA, IL 60572-8220	TELEPHONE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/04/99	109.82
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CRYSTAL CONCEPTS 604 N. GEARY STREET MT. PLEASANT, PA 15666	GIFTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/04/99	775.92

SUBTOTAL of Disbursements This Page (optional) 9,137.23

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. ACME PHOTO 227 MARKET STREET JOHNSTOWN, PA 15901	PHOTOGRAPHY EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/04/99	61.25
B. JOHNSTOWN REDEVELOPMENT AUTH. 4TH FLOOR-PUBLIC SAFETY BUILDING JOHNSTOWN, PA 15901	RENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/04/99	660.00
C. FEDERAL EXPRESS P. O. BOX 11840 MEMPHIS, TN 38101-1140	FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/04/99	22.75
D. POSTMASTER JOHNSTOWN, PA	POSTAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/10/99	2,409.00
E. INDIANA GAZETTE P. O. BOX 10 INDIANA, PA 15701	SUBSCRIPTION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/10/99	117.40
F. GREATER JOHNSTOWN WATER AUTHORITY P. O. BOX 1287 JOHNSTOWN, PA 15907-1287	UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/10/99	2.75
G. FLOWER BARN MILLCREEK RD. AT BUCKNELL AVE. JOHNSTOWN, PA 15909	FLORAL ARRANGE. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/10/99	39.22
H. FIELDS OF HEATHER 237 McKEAN AVENUE CHARLEROI, PA 15022	FLORAL ARRANGEMENTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/10/99	54.06
I. WESTMONT MOBIL 1735 GOUCHER STREET JOHNSTOWN, PA 15905	TRAVEL-GASOLINE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/10/99	77.05

SUBTOTAL of Disbursements This Page (optional) 3,443.48

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. GOLD KEY LEASE 300 OXFORD DRIVE, SUITE 310 MONROEVILLE, PA 15146	VEHICLE RENTAL	11/10/99	603.30
B. JAMES OSWALD 949 CARNEGIE AVENUE JOHNSTOWN, PA 15905	MEALS & CAMPAIGN OFFICE SUPPLIES	11/10/99	62.09
C. JOHNSTOWN OLDTIMERS BASEBALL c/o GEORGE ARCURIO, JR. 519 GROVE AVENUE JOHNSTOWN, PA 15902	TICKETS	11/10/99	100.00
D. CASH JOHNSTOWN, PA	POSTAGE, TRAVEL, VOL. EXP. & CAMPAIGN OFFICE SUPPLIES	11/10/99	64.05
E. LAUREL BANK 534 MAIN STREET JOHNSTOWN, PA 15901	BANK CHARGES BANK CHARGES	10/27/99 11/18/99	20.00 20.00
F. MICHELLE M. McGUIRE 616 SUNBERRY ST. JOHNSTOWN, PA 15904	WAGES	11/18/99	197.90
G. INDIANA COUNTY CHAMBER OF COMMERCE 1019 PHILADELPHIA ST. INDIANA, PA 15701	DUES	11/18/99	180.00
H. MINERS COMMUNITY FOOD PANTRY P. O. BOX 153 NANTY GLO, PA 15943	CONTRI.	11/18/99	100.00
I. FUND FOR PHILADELPHIA c/o PHYLLIS HALPERN OFFICE OF THE MAYOR ROOM 215 CITY HALL PHILADELPHIA, PA 19107	ROOM RENTAL - FUND RAISER RECP. EXP.	11/18/99	500.00

SUBTOTAL of Disbursements This Page (optional) 1,847.34

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code DAYLILY FLORAL & GIFT P. O. BOX 403 DAVIDSVILLE, PA 15928	FLORAL ARRANGE. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/18/99	37.10
B. Full Name, Mailing Address and ZIP Code BEV'S FLORAL SHOPPE 65 FAIRFIELD AVENUE JOHNSTOWN, PA 15906	FLORAL ARRANGE. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/18/99	43.00
C. Full Name, Mailing Address and ZIP Code ACME PHOTO 227 MARKET STREET JOHNSTOWN, PA 15901-1602	PHOTOGRAPHY EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/18/99	267.12
D. Full Name, Mailing Address and ZIP Code FLOOD CITY INTERNET 100 EISENHOWER BLVD. JOHNSTOWN, PA 15905	INTERNET CHARGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/18/99	39.00
E. Full Name, Mailing Address and ZIP Code DAILY AMERICAN P. O. BOX 638 SOMERSET, PA 15501-0638	NEWSPAPER SUBSCRIPTION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/18/99	137.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 523.22

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

	Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A.	JOSEPH SCHATZDORFER 633 WOOD STREET JOHNSTOWN, PA 15902	WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/99 11/30/99 12/09/99	40.64 31.56 49.46
B.	JOSEPH SCHATZDORFER 633 WOOD STREET JOHNSTOWN, PA 15902	WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/16/99 12/16/99	40.64 88.25
C.	JOSEPH SCHATZDORFER 633 WOOD STREET JOHNSTOWN, PA 15902	WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/23/99 12/30/99	38.35 36.09
D.	SOMERSET COUNTY CHAMBER OF COMMERCE 601 NORTH CENTER AVENUE SOMERSET, PA 15501-1025	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/99	500.00
E.	ROBERT C. ONDICK, CPA, P.C. BT FINANCIAL PLAZA - SUITE 220 551 MAIN STREET JOHNSTOWN, PA 15901	REIMBURSEMENT FOR COPY MACHINE EXP., PAX, TELE., & POSTAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/99	435.24
F.	ROBERT C. ONDICK, CPA, P.C. BT FINANCIAL PLAZA - SUITE 220 551 MAIN STREET JOHNSTOWN, PA 15901	ACCOUNTING SERVICE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/09/99	1,300.00
G.	POSTMASTER JOHNSTOWN, PA	POSTAGE POSTAGE POSTAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/99 11/30/99 12/30/99	231.00 33.00 429.00
H.	UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	FREIGHT FREIGHT FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/99 12/09/99 12/16/99	36.50 143.15 43.84
I.	UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	FREIGHT FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/23/99 12/30/99	77.77 55.00

SUBTOTAL of Disbursements This Page (optional) 3,609.49

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code NORTHERN EXPRESS P. O. BOX 5478 JOHNSTOWN, PA 15904	TRAVEL-GASOLINE TRAVEL-GASOLINE TRAVEL-GASOLINE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/99 12/09/99 12/23/99	94.11 79.30 79.53
B. Full Name, Mailing Address and ZIP Code LAUREL CHRYSLER 933 EISENHOWER BLVD. JOHNSTOWN, PA 15904	VEHICLE REPAIR Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/99	165.34
C. Full Name, Mailing Address and ZIP Code CHRYSLER FINANCIAL PAYMENT PROCESSING CENTER P. O. BOX 3208 MILWAUKEE, WI 53201-3200	VEHICLE RENTAL VEHICLE RENTAL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/99 12/23/99	226.30 290.50
D. Full Name, Mailing Address and ZIP Code JAMES OSWALD 949 CARNEGIE AVENUE JOHNSTOWN, PA 15905	CAMPAIGN OFFICE SUPPLIES & MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/99	76.63
E. Full Name, Mailing Address and ZIP Code JAMES OSWALD 949 CARNEGIE AVENUE JOHNSTOWN, PA 15905	CAMPAIGN OFFICE SUPPLIES, MEETING EXP, & MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/09/99	93.52
F. Full Name, Mailing Address and ZIP Code JAMES OSWALD 949 CARNEGIE AVENUE JOHNSTOWN, PA 15905	WAGES TRAVEL, MEALS & CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/23/99	447.75 66.73
G. Full Name, Mailing Address and ZIP Code THERESA VOYTKO 920 FRONHEISER STREET JOHNSTOWN, PA 15902	WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/30/99 12/16/99	634.73 634.73
H. Full Name, Mailing Address and ZIP Code THERESA VOYTKO 920 FRONHEISER STREET JOHNSTOWN, PA 15902	WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/16/99 12/30/99	1,000.00 634.73
I. Full Name, Mailing Address and ZIP Code MARK CRITZ 822 HIGHLAND AVENUE JOHNSTOWN, PA 15902	WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/30/99 12/16/99	428.83 520.80

SUBTOTAL of Disbursements This Page (optional) 5,473.53

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)
MURTHA FOR CONGRESS COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code MARK CRITZ 822 HIGHLAND AVENUE JOHNSTOWN, PA 15902	WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/16/99 12/30/99	441.25 476.32
B. Full Name, Mailing Address and ZIP Code BENSHOFF PRINTING 46 VALLEY PIKE JOHNSTOWN, PA 15905	CAMPAIGN OFFICE SUPPLIES CHRISTMAS CARDS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/30/99 12/30/99	857.54 2,559.90
C. Full Name, Mailing Address and ZIP Code CAMBRIA COUNTY DEPT. OF EMERGENCY SERVICES 40 CANDLELIGHT DRIVE SUITE 100 EBENSBURG, PA 15931-1959	ALARM MONITORING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/30/99	100.00
D. Full Name, Mailing Address and ZIP Code LATROBE BULLETIN P. O. BOX 111 LATROBE, PA 15650	SUBSCRIPTION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/30/99	70.00
E. Full Name, Mailing Address and ZIP Code INDIANA CHAMBER OF COMMERCE 1019 PHILADELPHIA STREET INDIANA, PA 15701	DUES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/30/99	35.00
F. Full Name, Mailing Address and ZIP Code AT&T WIRELESS P. O. BOX 900 1309 AURORA, IL 60572-8220	TELEPHONE TELEPHONE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/30/99 12/30/99	38.50 73.87
G. Full Name, Mailing Address and ZIP Code BRIER GROUP 242 VASSAR AVENUE CLARKS GREEN, PA 18411	POLITICAL CONSULTING POLITICAL CONSULTING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/30/99 12/30/99	4,166.67 4,166.67
H. Full Name, Mailing Address and ZIP Code SUSAN O'NEILL & ASSOCIATES 5910 GLOSTER ROAD BETHESDA, MD 20816	PUBLIC RELATIONS EXP. PUBLIC RELATIONS EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/30/99 12/30/99	2,000.00 2,000.00
I. Full Name, Mailing Address and ZIP Code GPU ENERGY P. O. BOX 391 ALLENHURST, NJ 07709-0005	UTILITIES UTILITIES UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/30/99 11/30/99 12/30/99	75.54 82.11 153.58

SUBTOTAL of Disbursements This Page (optional) 17,296.95

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SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
LAUREL BANK 534 MAIN STREET JOHNSTOWN, PA 15901	PAYROLL TAXES	12/09/99	1,197.13
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
MARY CATHERINE VOYTKO 920 FRONHEISER STREET JOHNSTOWN, PA 15902	WAGES WAGES	12/09/99 12/16/99	63.25 100.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
JUNIOR ACHIEVEMENT 445 SCHOOLHOUSE ROAD JOHNSTOWN, PA 15904	CONTRI.	12/09/99	50.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
TRIBUNE REVIEW CABIN HILL DRIVE GREENSBURG, PA 15601	AD	12/09/99	878.72
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
JOHNSTOWN REDEVELOPMENT AUTHORITY 4TH FLOOR-PUBLIC SAFETY BUILDING JOHNSTOWN, PA 15901	RENT	12/09/99	660.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
AT&T P. O. BOX 9001309 LOUISVILLE, KY 40290-1309	TELEPHONE	12/09/99	166.90
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
FLOWER GALLERY 635 CHURCH STREET INDIANA, PA 15701	FLORAL ARRANGE.	12/09/99	53.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
DAYLILY FLORAL & GIFT SHOP 110 N. MAIN ST. DAVIDSVILLE, PA 15928	FLORAL ARRANGE.	12/09/99	55.12
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
MARGARET HARRIS FLORAL 19 SOUTH 7TH STREET INDIANA, PA 15701	FLORAL ARRANGE.	12/09/99	54.02

SUBTOTAL of Disbursements This Page (optional) 3,278.14

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

FE7AN048

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

MURTHA FOR CONGRESS COMMITTEE

	Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A.	MBNA AMERICA BUSINESS CARD FOR THE P. O. BOX 15469 WILMINGTON, DE 19886-5469	CHECK DATED 12/9/99 FOLLOWING: $1,078.59 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B.	EXXON POS 75 JOHNSTOWN, PA EXXON POS 75 JOHNSTOWN, PA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/23/99 9/29/99	13.35 8.75
C.	EXXON POS 91 ARLINGTON, VA EXXON POS 75 JOHNSTOWN, PA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/21/99 11/13/99	10.36 6.50
D.	EXXON POS 75 JOHNSTOWN, PA EXXON POST 75 JOHNSTOWN, PA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99 11/06/99	24.00 14.50
E.	EXXON POS 91 ARLINGTON, VA EXXON POS 91 ARLINGTON, VA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/30/99 11/01/99	13.06 10.94
F.	EASYGRADE AUTO WASH JOHNSTOWN, PA EASYGRADE AUTO WASH JOHNSTOWN, PA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/18/99 9/18/99	13.00 13.00
G.	EASYGRADE AUTO WASH JOHNSTOWN, PA EASYGRADE AUTO WASH JOHNSTOWN, PA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/03/99 10/07/99	13.00 13.00
H.	EASYGRADE AUTO WASH JOHNSTOWN, PA EASYGRADE AUTO WASH JOHNSTOWN, PA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/13/99 10/23/99	13.00 13.00
I.	EASYGRADE AUTO WASH JOHNSTOWN, PA MICHAEL ROUND FINE LORTON, VA	TRAVEL GIFTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/11/99 11/06/99	13.00 62.99

SUBTOTAL of Disbursements This Page (optional) 255.45

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MBNA AMERICA BUSINESS CARD FOR THE P. O. BOX 15469 FOLLOWING WILMINGTON, DE 19886-5469 CONTINUED:	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B. Full Name, Mailing Address and ZIP Code U. S. HOUSE OF REPRESENTATIVES WASHINGTON, DC DENNY'S JOHNSTOWN, PA	Purpose of Disbursement MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/24/99 10/10/99	Amount of Each Disbursement This Period 27.90 17.50
C. Full Name, Mailing Address and ZIP Code EL RANCHO STEAKHOUSE JOHNSTOWN, PA EAT N PARK RESTAURANT SOMERSET, PA	Purpose of Disbursement MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/23/99 10/28/99	Amount of Each Disbursement This Period 30.46 13.52
D. Full Name, Mailing Address and ZIP Code EAT N PARK RESTAURANT SOMERSET, PA FOUR SEASONS HOTEL CARLSBAD, CA	Purpose of Disbursement MEALS LODGING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/10/99 9/21/99	Amount of Each Disbursement This Period 14.46 1,637.47
E. Full Name, Mailing Address and ZIP Code USPS ARLINGTON, VA U. S. HOUSE OF REPRESENTATIVES WASHINGTON, DC	Purpose of Disbursement POSTAGE CAMPAIGN OFFICE SUPP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/15/99 10/27/99	Amount of Each Disbursement This Period 11.75 100.00
F. Full Name, Mailing Address and ZIP Code U. S. CAPITAL HIST SOCIETY WASHINGTON, DC	Purpose of Disbursement CAMPAIGN OFFICE SUPP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/05/99	Amount of Each Disbursement This Period 77.00
G. Full Name, Mailing Address and ZIP Code FOUR SEASONS HOTELS CARLSBAD, CA HYATT REGENCY WASHINGTON, DC	Purpose of Disbursement (CREDIT) FUND RAISER RECP. EXP. FUND RAISER RECP. EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/21/99 11/16/99	Amount of Each Disbursement This Period (5,827.92) 2,200.00
H. Full Name, Mailing Address and ZIP Code PRECISION SIGN, INC. BELTSVILLE, MD	Purpose of Disbursement FUND RAISER RECP. EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/27/99	Amount of Each Disbursement This Period 2,521.00
I. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 823.14

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. B&B FLORAL 1106 SCALP AVENUE JOHNSTOWN, PA 15904	FLORAL ARRANGE.	12/09/99	158.42
B. CASH JOHNSTOWN, PA	VOL. EXP. & CAMPAIGN OFFICE SUPPLIES	12/09/99	65.85
C. LAUREL BANK 534 MAIN STREET JOHNSTOWN, PA 15901	IMPRINTED CHECKS BANK CHARGES BANK CHARGES	12/15/99 11/30/99 11/30/99	66.49 5.00 5.00
D. WESTMONT MOBIL 1735 GOUCHER STREET JOHNSTOWN, PA 15905	TRAVEL-GASOLINE	12/09/99	71.80
E. GOLD KEY LEASE 300 OXFORD DRIVE, SUITE 310 MONROEVILLE, PA 15146	VEHICLE RENTAL	12/09/99	603.30
F. MICHELLE McGUIRE 616 SUNBERRY ST. JOHNSTOWN, PA 15904	WAGES	12/16/99	61.84
G. BOISE CASCADE P. O. BOX 360755 PITTSBURGH, PA 15250-6755	CAMPAIGN OFFICE SUPPLIES	12/16/99	56.10
H. CITY OF JOHNSTOWN-BUREAU OF SEWAGE P. O. BOX 610 JOHNSTOWN, PA 15907	UTILITIES	12/16/99	8.15
I. GREATER JOHNSTOWN WATER AUTHORITY P. O. BOX 1287 JOHNSTOWN, PA 15907-1287	UTILITIES	12/16/99	2.75

SUBTOTAL of Disbursements This Page (optional)	1,104.70
TOTAL This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
KEYSTONE CHAPTER AMERICAN RED CROSS 110 SUNRAY DRIVE JOHNSTOWN, PA 15905	CONTRI.	12/16/99	125.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
NUNZIO MEDILE P. O. BOX 12 JOHNSTOWN, PA 15907	WAGES	12/16/99	447.75
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
CABLECOMM P. O. BOX 371464 PITTSBURGH, PA 15250-7464	UTILITIES	12/23/99	35.44
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
GTE-NORTH P. O. BOX 31222 TAMPA, FL 33631-3222	TELEPHONE	12/23/99	1,287.77
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
BEV'S FLORAL SHOPPE 65 FAIRFIELD AVENUE JOHNSTOWN, PA 15906	FLORAL ARRANGEMENTS FLORAL ARRANGEMENTS	12/23/99 12/30/99	44.00 53.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
JOHNSTON THE FLORIST 14179 LINCOLN WAY NORTH HUNTINGDON, PA 15642-2190	FLORAL ARRANGEMENTS	12/23/99	56.16
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
JOHNSTOWN CHAMBER OF COMMERCE ONE MARKET PLACE 111 MARKET STREET JOHNSTOWN, PA 15901-1608	DUES	12/23/99	191.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
MT. PLEASANT JOURNAL 23 SOUTH CHURCH STREET MT. PLEASANT, PA 15666	SUBSCRIPTION	12/30/99	35.60
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
BENSHOFF PRINTING 46 VALLEY PIKE JOHNSTOWN, PA 15905	CAMPAIGN OFFICE SUPPLIES	12/23/99	228.96

SUBTOTAL of Disbursements This Page (optional)	2,504.68
TOTAL This Period (last page this line number only)	133,537.71

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (in Full)
MURTHA FOR CONGRESS COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code MIKE TAYLOR FOR CONGRESS P. O. BOX 2389 ALBEMERELE, NC 28002	CONTRI. Disbursement for: Primary General Other (specify)	7/22/99	1,000.00
B. Full Name, Mailing Address and ZIP Code COMM. TO ELECT JOHN WOZNIAK P. O. BOX 476 JOHNSTOWN, PA 15907	TICKETS Disbursement for: Primary General Other (specify)	7/29/99	150.00
C. Full Name, Mailing Address and ZIP Code WESTMORELAND COUNTY DEMOCRATIC COMM. 14 EAST OTTERMAN STREET GREENSBURG, PA 15601	TICKETS CONTRI. Disbursement for: Primary General Other (specify)	7/29/99 9/16/99	50.00 225.00
D. Full Name, Mailing Address and ZIP Code DEMOCRAT CLUB OF WESTMORLAND COUNTY P. O. BOX 1102 GREENSBURG, PA 15601	TICKETS Disbursement for: Primary General Other (specify)	7/29/99	50.00
E. Full Name, Mailing Address and ZIP Code INDIANA COUNTY DEMOCRATIC COMM. c/o DELLA JEAN MANNING 1275 SIMMS ROCK ROAD PENN RUN, PA 15765	TICKETS AD Disbursement for: Primary General Other (specify)	7/29/99 9/30/99	24.00 50.00
F. Full Name, Mailing Address and ZIP Code FRIENDS OF VINCENT A. VICITES 14 CRESTVUE DRIVE UNIONTOWN, PA 15041	TICKETS Disbursement for: Primary General Other (specify)	8/12/99	50.00
G. Full Name, Mailing Address and ZIP Code CAMBRIA TWP. c/o SUSAN EVANS 509 MUNICIPAL ROAD EBENSBURG, PA 15931	IN KIND CONTRI. FOR PARK RENTAL APPRECIATION PICNIC-FRIENDS OF TED & SUSAN Disbursement for: Primary General Other (specify)	8/12/99	180.00
H. Full Name, Mailing Address and ZIP Code	TED MARTIN SUSAN EVANS 509 MUNICIPAL ROAD EBENSBURG, PA 15931 Disbursement for: Primary General Other (specify)		
I. Full Name, Mailing Address and ZIP Code TOM TANGRETTI P. O. BOX 292 GREENSBURG, PA 15601	TICKETS Disbursement for: Primary General Other (specify)	8/19/99	100.00

SUBTOTAL of Disbursements This Page (optional) 1,879.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. COMM. TO ELECT KATHALYN O'BRIEN 11 FAIRWAY DRIVE GREENSBURG, PA 15601	TICKETS	8/19/99	50.00
B. COMM. TO ELECT JOHN PECK P. O. BOX 985 GREENSBURG, PA 15601	TICKETS	8/19/99	50.00
C. FRIENDS OF MIKE FORBES P. O. BOX 505 FARMINGVILLE, NY 11738	CONTRI.	8/19/99	1,000.00
D. COMM. TO ELECT EVANKO 115 SIX FLAT ROAD HOMER CITY, PA 15748	CONTRI.	8/26/99	50.00
E. COMM. TO ELECT PAMELA TOKAR ICKES c/o DOUG BELL P. O. BOX 123 SOMERSET, PA 15501	CONTRI.	9/09/99	1,000.00
F. COMM. TO ELECT BOB WILL c/o DOUG BELL P. O. BOX 123 SOMERSET, PA 15501	CONTRI.	9/09/99	1,000.00
G. CITIZENS FOR McQUOWN c/o DEBBIE PLOWCHA, TREAS. 103 W. ELM STREET HOMER CITY, PA 15748	CONTRI.	9/16/99	100.00
H. SOMERSET COUNTY DEMOCRATIC COMM. 139 WEST UNION ST., P. O. BOX 11 SOMERSET, PA 15501	AD	9/16/99	50.00
I. WECHT 2000 WEST PENN BLDG. 14 WOOD ST. PITTSBURGH, PA 15222	CONTRI.	9/23/99	1,000.00

SUBTOTAL of Disbursements This Page (optional) 4,300.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)
MURTHA FOR CONGRESS COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code CLASSIC CATERING 612 BROAD STREET JOHNSTOWN, PA 15906	IN KIND CONTRI. FOR APPRECIATION PICNIC FRIENDS OF TED & SUSAN Disbursement for: ☐ Primary ☐ General ☐ Other (specify) TED BARANIK	9/23/99	2,738.00
B. Full Name, Mailing Address and ZIP Code SUSAN EVANS 509 MUNICIPAL ROAD EBENSBURG, PA 15931	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code BASKETS GALORE 1439 PAULTON ST. JOHNSTOWN, PA 15905	IN KIND CONTRI. FOR DECORATIONS-APPREC. PICNIC FRIENDS OF TED & SUSAN Disbursement for: ☐ Primary ☐ General ☐ Other (specify) TED BARANIK	9/23/99	15.22
D. Full Name, Mailing Address and ZIP Code SUSAN EVANS 509 MUNICIPAL ROAD EBENSBURG, PA 15931	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code THOMAS C. CERASO CAMPAIGN COMM. FOR COMM. OF WESTMORELAND COUNTY 1130 PARKVIEW DRIVE NEW KENSINGTON, PA 15068	Purpose of Disbursement TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/30/99	Amount of Each Disbursement This Period 250.00
F. Full Name, Mailing Address and ZIP Code COMM. TO ELECT CHRIS SCHERER FOR SHERIFF 226 S. MAPLE AVE., SUITE 208 GREENSBURG, PA 15601	Purpose of Disbursement TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/30/99	Amount of Each Disbursement This Period 200.00
G. Full Name, Mailing Address and ZIP Code COMM. TO ELECT AL BELL, JUDGE 1162 SWEDE HILL ROAD GREENSBURG, PA 15601	Purpose of Disbursement TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/30/99	Amount of Each Disbursement This Period 100.00
H. Full Name, Mailing Address and ZIP Code ARMSTRONG COUNTY DEMOCRATIC COMM. c/o SHARON ARDULNI 1001 1ST STREET. RURAL VALLEY, PA 16249	Purpose of Disbursement TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/07/99	Amount of Each Disbursement This Period 24.00
I. Full Name, Mailing Address and ZIP Code CAMBRIA COUNTY DEMOCRAT COMMITTEE P. O. BOX 92 EBENSBURG, PA 15931	Purpose of Disbursement TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/07/99	Amount of Each Disbursement This Period 10.00

SUBTOTAL of Disbursements This Page (optional)	3,337.22
TOTAL This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (in Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
FAYETTE COUNTY DEMOCRAT COMM. c/o FRED LEEDER 14 JUDITH ST. UNIONTOWN, PA 15401	TICKETS	10/07/99	100.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
SOMERSET COUNTY DEMOCRAT COMM. 139 WEST UNION ST., P. O. BOX 11 SOMERSET, PA 15501	TICKETS	10/07/99	200.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
BENSHOFF PRINTING 46 VALLEY PIKE JOHNSTOWN, PA 15905	IN KIND CONTRIB INVITATIONS FRIENDS OF TED & SUSAN TED BARANIK	10/07/99	619.04
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	SUSAN EVANS 509 MUNICIPAL ROAD EBENSBURG, PA 15931		
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
INDIANA COUNTY DEMOCRAT COMM. c/o DELLA JEAN MANNING 1275 SIMMS ROCK ROAD PENN RUN, PA 15765	TICKETS	10/07/99	75.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
CAROL HANNA FOR JUDGE COMM. 950 PHILADELPHIA STREET INDIANA, PA 15701	CONTRI.	10/14/99	100.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**

SUBTOTAL of Disbursements This Page (optional)	1,094.04
TOTAL This Period (last page this line number only)	

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SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

	Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A.	WESTMORELAND COUNTY DEMOCRAT COMM. 14 EAST OTTERMAN STREET GREENSBURG, PA 15601	TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99	300.00
B.	FAYETTE CO. DEM. COMM. c/o FRED LEDDER 14 JUDITH ST. UNIONTOWN, PA 15401	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99	1,000.00
C.	FRIENDS OF JOE BACA P. O. BOX 362 SAN BERNADINO, CA 92404	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/99	1,000.00
D.	LOMBARDO'S 935 SCALP AVENUE JOHNSTOWN, PA 15904	IN-KIND CONTRI. RECEPTION-FRIENDS OF TED & SUSAN Disbursement for: ☐ Primary ☐ General ☐ Other (specify) TED BARANIK SUSAN EVANS	10/27/99	2,420.00
E.		Purpose of Disbursement 509 MUNICIPAL ROAD EBENSBURG, PA 15931 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F.	COMM. TO ELECT SUSAN KUHAR-CLERK OF COURT 807 EAST CRAWFORD ST. EBENSBURG, PA 15931	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/04/99	50.00
G.	COMM. TO ELECT PATTY BERKEBILE 106 RUTH E. LANE PORTAGE, PA 15946	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/04/99	50.00
H.	RECEIPT OF CHECK FROM: ARTHUR C. PRICE, SR. 1148 THIRD STREET NANTY GLO, PA 15943-1142	CONTRI. TO DEFRAY EXPENSES OF BARANIK EVANS RECEPTION FRIENDS OF TED & SUSAN Disbursement for: ☐ Primary ☐ General ☐ Other (specify) TED BARANIK	10/27/99	(25.00)
I.	VOID	Purpose of Disbursement SUSAN EVANS 509 MUNICIPAL ROAD EBENSBURG, PA 15931 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 4,795.00

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

FE7AN048

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 6 OF 7

FOR LINE NUMBER 21

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)
MURTHA FOR CONGRESS COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code SOMERSET COUNTY DEMOCRAT COMM. 139 WEST UNION ST., P. O. BOX 11 SOMERSET, PA 15501	CHECK DATED 11/18/99 $1,584.28 Disbursement for: ☐ Primary ☐ General ☐ Other (specify) IN-KIND CONTRI		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement FOR ADVERTISING PAID BY SOMERSET COUNTY DEM. COMM. TO THE FOLLOWING: Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code THE NEW REPUBLIC NEWSPAPER P. O. BOX 239 145 CENTER STREET MEYERSDALE, PA 15552	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/18/99	216.00
D. Full Name, Mailing Address and ZIP Code SOMERSET NEWSPAPERS, INC. 334 W. MAIN STREET SOMERSET, PA 15501-0638	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/18/99	1,259.13
E. Full Name, Mailing Address and ZIP Code THE JOHNSTOWN TRIBUNE PUBLISHING COMPANY 425 LOCUST STREET JOHNSTOWN, PA 15901	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/18/99	109.15
F. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
H. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	1,584.28
TOTAL This Period (last page this line number only)	

FE7AN049

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 7 OF 7

FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code WESTMORELAND COUNTY DEMOCRATIC COMM. 14 EAST OTTERMAN STREET GREENSBURG, PA 15601	AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/99	150.00
B. Full Name, Mailing Address and ZIP Code SALUTE TO JEANNE WESTMORELAND COUNTY RECORDER OF DEEDS c/o JIM ANTONIONO 11 NORTH MAIN ST. GREENSBURG PA 15601	AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/30/99	50.00
C. Full Name, Mailing Address and ZIP Code FRIENDS OF TOM MURPHY c/o DAVID RODERICK USX TOWER - SUITE 6200 600 GRANT ST., PITTSBURGH PA 15219	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/09/99	1,000.00
D. Full Name, Mailing Address and ZIP Code PEG SHEPLER 310 WEST VINCENT LIGONIER, PA 15658	REIMBURSEMENT IN-KIND CONTRI FOR MEETING EXPENSES 12TH CONG. DIST. AFFIRMATIVE ACTION COMM. Disbursement for: ☐ Primary ☐ General ☐ Other (specify) LIGONIER PA	12/16/99	128.85
E. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	1,328.85
TOTAL This Period (last page this line number only)	18,318.39

FE7AN049

SCHEDULE C
Revised 3/80)

LOANS

Page 1 of 1 for
LINE NUMBER 13a
(Use separate schedules for each numbered line)

Name of Committee (In Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
MBNA AMERICA 1000 SAMOSET DRIVE WILMINGTON, DE 19884-0404 Election: ☐ Primary ☐ General ☐ Other (specify):	$20,000.00 MASTER CARD ACCOUNT		$9,051.51 SEE ATTACHED SCH. C-1

Terms: Date Incurred _____ Date Due _____ Interest Rate _____%(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding
JOHN P. MURTHA 109 COLGATE AVENUE JOHNSTOWN, PA 15905	U. S. HOUSE OF REP.	CONGRESSMAN	$SEE SCH. C-1
2. Full Name, Mailing Address and ZIP Code			$
3. Full Name, Mailing Address and ZIP Code			$

B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: ☐ Primary ☐ General ☐ Other (specify):			

Terms: Date Incurred _____ Date Due _____ Interest Rate _____%(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding
			$
2. Full Name, Mailing Address and ZIP Code			$
3. Full Name, Mailing Address and ZIP Code			$

SUBTOTALS This Period This Page (optional) 9,051.51

TOTALS This Period (last page in this line only) 9,051.51

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1
Federal Election Commission
Washington, D.C. 20463

Supplementary for Information
found on Page 1 of Schedule C

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

NAME OF COMMITTEE (IN FULL)	FEC IDENTIFICATION NUMBER
MURTHA FOR CONGRESS	041343 C00019075

FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER)	AMOUNT OF LOAN (MasterCard account)	INTEREST RATE (APR)
MBNA AMERICA 1000 Samoset Dr Wilmington De. 19884	$20,000	17.90%
	DATE INCURRED OR ESTABLISHED: 2/27/98	DATE DUE: Revolving

A. Has the loan been restructured? ☒ No ☐ Yes If Yes date originally incurred: _____

B. If line of credit, amount of this draw: _____ Up to $20,000 total outstanding balance: $9,051.51 12/31/99

C. Are other parties secondarily liable for the debt incurred?
☐ No ☒ Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
☒ No ☐ Yes If yes, specify: _____

What is the value of this collateral? _____

Does the lender have a perfected security interest in it? ☐ No ☐ Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?
☒ No ☐ Yes If yes, specify: _____ What is the estimated value? _____

A depository account must be established pursuant to 11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account established: _____ Location of account: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

Personal Guarantee of John Murtha

G. COMMITTEE TREASURER		DATE
TYPED NAME ROBERT C. ONDICK	SIGNATURE Robert C. Ondick	1/24/00

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.

II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.

III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.

AUTHORIZED REPRESENTATIVE		TITLE	DATE
CHARLES F KLOCSIK	SIGNATURE	VICE PRESIDENT	1/24/00
TYPED NAME			

12/91

FSAN144

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 1/27/00
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked and/or Date of Receipt
☐	Electronic Filing	

RJB — PREPARER

1/31/00 — DATE PREPARED

(4/98)