REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
OCT 16 11 22 AM '98

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.
BT FINANCIAL PLAZA - SUITE 220
551 MAIN STREET

CITY, STATE and ZIP CODE
JOHNSTOWN, PA 15901

STATE/DISTRICT
PA/12TH DISTRICT

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 for the _____ (Type of Election) election on _____ in the State of _____
☐ Termination Report

This report contains activity for 1998 ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period JULY 1, 1998 through SEPT. 30, 1998		
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(a))	80,505.00	277,144.59
	(b) Total Contribution Refunds (from Line 20(d))	-0-	-0-
	(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	80,505.00	277,144.59
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	79,015.46	215,091.01
	(b) Total Offsets to Operating Expenditures (from Line 14)	75.00	115.25
	(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	78,940.46	214,975.76
8.	Cash on Hand at Close of Reporting Period (from Line 27)	243,265.79	
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)	5,376.18	

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. ONDICK

Signature of Treasurer

Date
10/13/98

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

FE8AN008

FEC FORM 3
(revised 4/97)

DETAILED SUMMARY PAGE

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

Name of Committee (in full)	Report Covering the Period:
MURTHA FOR CONGRESS COMMITTEE	From: JULY 1, 1998 To: SEPT. 30, 1998

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)	20,005.00		11(a)(i)
(ii) Unitemized			11(a)(ii)
(iii) Total of contributions from individuals	20,005.00	82,305.00	11(a)(iii)
(b) Political Party Committees		189.59	11(b)
(c) Other Political Committees (such as PACs)	60,500.00	194,650.00	11(c)
(d) The Candidate			11(d)
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	80,505.00	277,144.59	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.)	75.00	115.25	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	490.17	1,266.45	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	81,070.17	278,526.29	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	79,015.46	215,091.01	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	11,975.00	25,989.52	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	90,990.46	241,080.53	22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	$	253,186.08	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	$	81,070.17	24
25. SUBTOTAL (add Line 23 and Line 24)	$	334,256.25	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	$	90,990.46	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	$	243,265.79	27

FEC FORM 3

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 1 OF 6

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

	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 John Dugan 8301 Miss Anne Lane Annandale, VA 22003 Receipt For: 1998 [X] Primary [ ] General [ ] Other (specify):	Lockheed Martin Corp. 1725 Jefferson Davis HWY Arlington, VA 22202 Occupation: Director-Leg. Affairs Aggregate Year-to-Date > $ 250	7/30/98	$ 250
B. Full Name, Mailing Address and ZIP Code LeRoy Kline Jr. 1709 Olmsted Way West camp Hill, PA 17011 Receipt For: 1998 [X] Primary [ ] General [ ] Other (specify):	Name of Employer Delta Dev. Grp. 207 House Avenue #103 Camp Hill, PA 17011 Occupation: President Aggregate Year-to-Date > $ 1,000	Date (month, day, year) 7/30/98	Amount of Each Receipt this Period $1,000
C. Full Name, Mailing Address and ZIP Code Raymond McGee 421 Polo Club Drive Moon Twp. PA 15108 Receipt For: 1998 [X] Primary [ ] General [ ] Other (specify):	Name of Employer Horsehead Industries Frankfort Road Monaca, PA 15061 Occupation: President Aggregate Year-to-Date > $ 500	Date (month, day, year) 7/30/98	Amount of Each Receipt this Period $ 500
D. Full Name, Mailing Address and ZIP Code Don Munce 4332 NE Courtney Drive Lee's Summit, MO 64064 Receipt For: 1998 [X] Primary [ ] General [ ] Other (specify):	Name of Employer NRCCCA 900 SW Oldham Pkwy Lee's Summit, MO 64081 Occupation: President Aggregate Year-to-Date > $ 500	Date (month, day, year) 7/30/98	Amount of Each Receipt this Period $ 500
E. Full Name, Mailing Address and ZIP Code Ronald Statile 2302 Meadow Vue Drive Moon Twp. PA 15108 Receipt For: 1998 [X] Primary [ ] General [ ] Other (specify):	Name of Employer Zinc Corp. of America 300 Frankfort Road Monaca, PA 15061 Occupation: Executive Aggregate Year-to-Date > $ 250	Date (month, day, year) 7/30/98	Amount of Each Receipt this Period $ 250
F. Full Name, Mailing Address and ZIP Code Vance Stewart RR2 B3 Boswell, PA 15531 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer Ligonier Mt. Land Co. 261 Aspen Mt. Road Boswell, PA 15531 Occupation: Property Manager Aggregate Year-to-Date > $ 100	Date (month, day, year) 7/30/98	Amount of Each Receipt this Period $ 100
G. Full Name, Mailing Address and ZIP Code George Mowl 120 Hutchinson Street Pittsburgh, PA 15218 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer Ligonier Mt. Land Co. 261 Aspen Mt. Road Boswell, PA 15531 Occupation: Owner Aggregate Year-to-Date > $ 100	Date (month, day, year) 7/30/98	Amount of Each Receipt this Period $ 100
SUBTOTAL of Receipts This Page (optional)			$ 2,700
TOTAL This Period (last page this line number only)			

CHEDULE A — ITEMIZED RECEIPTS

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

PAGE 2 OF 6

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (In Full)

Martha 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
Vincent Coates, Jr. 1927 Duffield Lane Alexandria, VA 22307	Kimmitt Coates & McCarthy 1730 M St., NW #911 Washington, DC 20036 President $1,000	9/01/98	$1,000
Receipt For: [ ] Primary [X] 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
Robert Ging RR 3, Box 220 Confluence, PA 15424-9610	Self-Employed RR 3, Box 220 Confluence, PA 15424-9610 Attorney $ 250	9/01/98	$ 250
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
Peter Nelson 14 Hamilton Lane Darien, CT 06820	Horsehead Industries 110 East 59th Street New York, NY 10072 Management $ 500	9/01/98	$ 500
Receipt For: 1998 [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
Andrew Ondo RD 4, Box 391 Indiana, PA 15701	Retired $ 5	9/01/98	$ 5
Receipt For: [ ] Primary [X] 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
Nina Seganos 819 Napoleon Street Johnstown, PA 15901	Retired $ 300	9/01/98	$ 300
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
Lee Wilson 9214 Inverness Road Santee, CA 92071	Continental Maritime Ind 1995 Bay Front Street San Diego, CA 92113 Attorney $ 250	9/01/98	$ 250
Receipt For: 1998 [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
VOID			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):			

OTAL of Receipts This Page (optional) $2,305

L 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 3 OF 6 | 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	Date (month, day, year)	Amount of Each Receipt this Period
Trinity Advisors For the partner of:			
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
Joseph Egan Jr. 2121 Murray Street Philadelphia, PA 19115	Congress Abstract Title Corp. 230 S. Broad St. 8th Fl. Philadelphia, PA 19102		
Receipt For: 1998 ☒ Primary ☐ General ☐ Other (specify):	Occupation CEO	9/01/98	$ 1,000
	Aggregate Year-to-Date > $ 1,000		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	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			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VOID			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

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

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 4 OF 6

FOR LINE NUMBER 11a(1)

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

	Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A.	Paula Barrie 4714 Linnean Avenue, NW Washington, DC 20008	Occupation: Housewife Aggregate Year-to-Date > $ 500	9/30/98	$ 500
	Receipt For: [ ] Primary [X] General [ ] Other (specify):			
B.	John Braun 211 Yale Drive Alexandria, VA 22314	Name of Employer: US Air Force Headquarters Room 1D373, 1480AF Pentagon Washington, DC 20330-1480 Occupation: Nat'l Security Neg. Div. Aggregate Year-to-Date > $ 250	9/30/98	$ 250
	Receipt For: [ ] Primary [X] General [ ] Other (specify):			
C.	Jason Farrow 6 Harbor View Avenue Norwalk, CT 06854	Name of Employer: Sony Electronics Inc. 1 Sony Drive Park Ridge, NJ 07656 Occupation: SVP, Public Affairs Aggregate Year-to-Date > $ 500	9/30/98	$ 500
	Receipt For: [ ] Primary [X] General [ ] Other (specify):			
D.	George Forschler PO Box 258 Mount Vernon, PA 22121	Name of Employer: Forschler & Assoc. 110 N. Royal St. #300 Alexandria, VA 22314 Occupation: President & CEO Aggregate Year-to-Date > $ 500	9/30/98	$ 500
	Receipt For: [ ] Primary [X] General [ ] Other (specify):			
E.	Teresa Heinz Rosemont Farm-Fox Chapel Pittsburgh, PA 15238	Name of Employer: Occupation: Retired Aggregate Year-to-Date > $ 1,000	9/30/98	$1,000
	Receipt For: [ ] Primary [X] General [ ] Other (specify):			
F.	William Wight 8209 Langbrook Road Springfield, VA 22152	Name of Employer: William Wight, LLC PO Box 25204 Arlington, VA 22202 Occupation: Aggregate Year-to-Date > $ 250	9/30/98	$ 250
	Receipt For: [ ] Primary [X] General [ ] Other (specify):			
G.	Damian Zamias 925 1/2 St. James Street Pittsburgh, PA 15232	Name of Employer: Zamias Development 300 Market Street Johnstown, PA 15901 Occupation: President & CEO Aggregate Year-to-Date > $ 1,000	9/30/98	$1,000
	Receipt For: [ ] Primary [X] General [ ] Other (specify):			

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

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 6

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (In Full)

Martha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Marshall Brachman 444 Carbery Place, NE Washington, DC 20002	Name of Employer Computerized Bus. Sys. PO Box 2200 Fort Worth, TX 76113	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period $1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation President		
	Aggregate Year-to-Date > $ 1,000		
B. Full Name, Mailing Address and ZIP Code Eric Clancy 120 Sholly Drive Mechanicsburg, PA 17055	Name of Employer Delta Dev. Group 207 House Ave., #103 Camp Hill, PA 17011	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period $1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 1,000		
C. Full Name, Mailing Address and ZIP Code Cordis Colburn 7618 Glenville Ct. Springfield, VA 22153	Name of Employer General Dynamics Corp. 3190 Fairview Park Dr. Falls Church, VA 22042	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period $ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Dir. of Gov't Rel & Leg. Aff.		
	Aggregate Year-to-Date > $ 250		
D. Full Name, Mailing Address and ZIP Code Gordon England 4408 Lost Creek Blvd. Aledo, TX 76008-3661	Name of Employer Lockheed-Ft. Worth PO Box 748 Fort Worth, TX 76107	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period $ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Management		
	Aggregate Year-to-Date > $ 500		
E. Full Name, Mailing Address and ZIP Code Steven Hyjek 8615 Hampton Way Fairfax Station, VA 22039	Name of Employer Hyjek & Fix Inc. 2100 PA Ave, NW #560 Washington, DC 20037	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period $1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation President		
	Aggregate Year-to-Date > $ 2,000		
F. Full Name, Mailing Address and ZIP Code Joyce Maurer 1815 Linden Lake Road Fort Collins, CO 80524-5015	Name of Employer	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period $ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Housewife		
	Aggregate Year-to-Date > $ 250		
G. Full Name, Mailing Address and ZIP Code Sandra Meredith 2828 Wisconsin Ave, NW #304 Washington, DC 20007	Name of Employer Meredith Concept Grp. 601 King Street Alexandria, VA 22314	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period $ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation President		
	Aggregate Year-to-Date > $ 250		

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

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

EDULE A — ITEMIZED RECEIPTS

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

PAGE 6 OF 6

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	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
James O'Hora 780 S. Westbourne Road West Chester, PA 19382	Enertec Div/Avicore NA 10480 Little Paxtuxent Columbia, MD 21044 V/P-Sales & Service $1,000	9/30/98	$1,000
Receipt For: [ ] Primary [X] 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
Susan O'Neill 5910 Gloster Road Bethesda, MD 20816	O'Neill & Assoc. 371 Main Street Harwichport, MA 02546 President $2,000	9/30/98	$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
Lawrence Rhoades 224 Maple Avenue Pittsburgh, PA 15218	Extrude Hone Corp. PO Box 527 Irwin, PA 15642 President $1,000	9/30/98	$1,000
Receipt For: [ ] Primary [X] 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
Karen Schecter 105 Sylvan Court Alexandria, VA 22304	Ann Eppard Assoc. Ltd 14 Wolfe Street Alexandria, VA 22314 Vice-President $ 500	9/30/98	$ 500
Receipt For: [ ] Primary [X] 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 Shuster 320 N. 30th Street Camp Hill, PA 17011	Klett Lieber Rooney & Schorling 240 N. 3rd St., #600 Harrisburg, PA 17101-1503 Attorney $1,000	9/30/98	$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
Stanfield Tindal 2346 Greenwich Street Falls Church, VA 22046	Stanfield Tindal Inc. 2346 Greenwich Street Falls Church, VA 22046 President $ 250	9/30/98	$ 250
Receipt For: [ ] Primary [X] 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 Whitner 8013 Candlewood Drive Alexandria, VA 22306	RC Whitner & Assoc. 1800 N. Kent St. #1104 Arlington, VA 22204 President $ 2,000	9/30/98	$1,000
Receipt For: [ ] Primary [X] General [ ] Other (specify):			

Subtotal of Receipts This Page (optional)	$5,750.
This Period (last page this line number only)	$20,005

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 1 OF 7

FOR LINE NUMBER 11c

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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 Coltec Industries PAC 1730 M Street #911 Washington, DC 20036 Receipt For: 1998 [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 1,000	7/30/98	$1,000
B. Full Name, Mailing Address and ZIP Code Drive Political Fund 25 Louisiana Avenue, NW Washington, DC 20001 Receipt For: 1998 [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 1,000	7/30/98	$1,000
C. Full Name, Mailing Address and ZIP Code Nat'l Assoc. of Water Companies PAC 1725 K Street, NW #1212 Washington, DC 20006 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 500	7/30/98	$ 500
D. Full Name, Mailing Address and ZIP Code Textron Inc. PAC PO Box 878 Providence, RI 02901 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $5,000	7/30/98	$5,000
E. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code VOID Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) ..... $ 7,500

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

CHEDULE A — ITEMIZED RECEIPTS

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PAGE 2 OF 7

FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code American Nurses Assoc. PAC 600 Maryland Avenue, SW Suite 100 West Washington, DC 20024-2571	Name of Employer —	Date (month, day, year) 9/01/98	Amount of Each Receipt this Period $ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $ 500	
B. Full Name, Mailing Address and ZIP Code Citizens for Responsible Gov't. Emp. of MSE, Inc. PO Box 4078 Butte, MT 59701	Name of Employer	Date (month, day, year) 9/01/98	Amount of Each Receipt this Period $ 500
Receipt For: 1998 ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $ 500	
C. Full Name, Mailing Address and ZIP Code Int'l Union of Operating Engineers PAC 1125-17th Street, NW Washington, DC 20036	Name of Employer	Date (month, day, year) 9/01/98	Amount of Each Receipt this Period $4,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $4,000	
D. Full Name, Mailing Address and ZIP Code Seafarers Political Activity 5201 Auth Way Camp Springs, MD 20746	Name of Employer	Date (month, day, year) 9/01/98	Amount of Each Receipt this Period $5,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $5,000	
E. Full Name, Mailing Address and ZIP Code U.A. Political Education Comm. 901 Massachusetts Avenue, NW Washington, DC 20001	Name of Employer	Date (month, day, year) 9/01/98	Amount of Each Receipt this Period $2,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $2,000	
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 > $	

TOTAL of Receipts This Page (optional) > $12,000

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 3 OF 7

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 Hughes Electronics Fund-Federal PO Box 956 El Segundo, CA 90245-0956	—	9/30/98	$1,000
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 1,000		
B. Full Name, Mailing Address and ZIP Code Loral Spacecom Civic Responsibility Fund 1755 Jefferson Davis Hwy. #1007 Arlington, VA 22202	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation	9/30/98	$1,000
	Aggregate Year-to-Date > $ 3,000		
C. Full Name, Mailing Address and ZIP Code Nat'l Education Assn. PAC 1201-16th Street, NW Washington, DC 20036	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation	9/30/98	$2,000
	Aggregate Year-to-Date > $ 6,000		
D. Full Name, Mailing Address and ZIP Code Nat'l League of Postmasters PAC 1023 N. Royal Street Alexandria, VA 22314-1569	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation	9/30/98	$2,000
	Aggregate Year-to-Date > $2,000		
E. Full Name, Mailing Address and ZIP Code Newport News Shipbuilding PAC 801 PA Avenue, NW #350 Washington, DC 20004	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation	9/30/98	$4,000
	Aggregate Year-to-Date > $6,000		
F. Full Name, Mailing Address and ZIP Code NSA StonePAC 1415 Elliot Place, NW Washington, DC 20007	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation	9/30/98	$2,000
	Aggregate Year-to-Date > $2,000		
G. Full Name, Mailing Address and ZIP Code PAC, Inc. PAC 1500 PRC Drive McLean, VA 22102	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation	9/30/98	$1,000
	Aggregate Year-to-Date > $1,000		

TOTAL of Receipts This Page (optional) $13,000

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 4 OF 7 | 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 Action Comm. for Rural Electrification 4301 Wilson Blvd. Arlington, VA 22203-1860		9/30/98	$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $1,000	
B. Full Name, Mailing Address and ZIP Code Alliant Techsystems Emp. Citizenship Fund 600-2nd Street, NE Hopkins, MN 55343		9/30/98	$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $3,000	
C. Full Name, Mailing Address and ZIP Code American Nurses PAC 600 Maryland Avenue, SW Suite 100 W Washington, DC 20024-2571		9/30/98	$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $1,000	
D. Full Name, Mailing Address and ZIP Code Battelle Good Gov't Comm. 24 Wiveliscombe New Albany, OH 43054		9/30/98	$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $2,000	
E. Full Name, Mailing Address and ZIP Code Bethlehem Steel Good Gov't Comm. 1725 Martin Tower Bethlehem, PA 18016		9/30/98	$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $2,000	
F. Full Name, Mailing Address and ZIP Code DYN Corp. PAC 2000 Edmund Halley Drive Reston, VA 22091		9/30/98	$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $1,000	
G. Full Name, Mailing Address and ZIP Code GenPAC 175 Ghent Road Fairlawn, OH 44333-3300		9/30/98	$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $ 1,000	

TOTAL of Receipts This Page (optional) > $6,500

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 5 OF 7 | 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 Raytheon PAC 141 Spring Street Lexington, MA 02173-7899	—	9/30/98	$2,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 5,000		
B. Full Name, Mailing Address and ZIP Code SAIC Voluntary PAC 10260 Campus Point Drive San Diego, CA 92121	Name of Employer	9/30/98	$1,000 –
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 8,000		
C. Full Name, Mailing Address and ZIP Code UAW V CAP 8000 East Jefferson Avenue Detroit, MI 48214-3963	Name of Employer	9/30/98	$3,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 8,000		
D. Full Name, Mailing Address and ZIP Code United Defense Employees PAC 525 Wilson Blvd. Suite 700 Arlington, VA 22209	Name of Employer	9/30/98	$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 2,000		
E. Full Name, Mailing Address and ZIP Code United Technologies Corp. PAC-Federal Suite 600, 1401 Eye Street, NW Washington, DC 20005-6523	Name of Employer	9/30/98	$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 4,000		
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 > $		

TOTAL 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

PAGE 6 OF 7

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 American Maritime Officers Ret. PAC 490 L'Enfant Plaza East, SW #7204 Washington, DC 20024	—	9/30/98	$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $ 3,000	
B. Full Name, Mailing Address and ZIP Code ATLA PAC 1050-31st Street, NW Washington, DC 20007	Name of Employer	9/30/98	$5,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $ 7,500	
C. Full Name, Mailing Address and ZIP Code Condor Systems Inc. PAC 2133 Samaritan Drive San Jose, CA 95124	Name of Employer	9/30/98	$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $ 3,000	
D. Full Name, Mailing Address and ZIP Code DRS Good Gov't Fund 2600 Virginia Ave., NW #210 Washington DC, 20037	Name of Employer	9/30/98	$2,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $ 3,000	
E. Full Name, Mailing Address and ZIP Code Nat'l Right to Life PAC 419-7th Street, NW #500 Washington, DC 20004	Name of Employer	9/30/98	$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $ 500	
F. Full Name, Mailing Address and ZIP Code Ocean Spray PAC One Ocean Spray Drive Lakeville-Middleboro, MA 02349	Name of Employer	9/30/98	$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $ 2,000	
G. Full Name, Mailing Address and ZIP Code PA Credit Union league Leg. PAC 4309 N. Front Street Harrisburg, PA 17110	Name of Employer	9/30/98	$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $ 1,000	

TOTAL of Receipts This Page (optional) > $11,500

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

DULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11c

nformation copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial se, other than using the name and address of any political committee to solicit contributions from such committee.

E OF COMMITTEE (In Full)

rtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Sprint Corp. PAC PO Box 11315 Kansas City, MO 64112 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer — Occupation Aggregate Year-to-Date > $ 1,000	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period $1,000
B. Full Name, Mailing Address and ZIP Code Television & Radio PAC 1771 N Street, NW Washington, DC 20036 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 1,000	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period $1,000 —
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

This Period (last page this line number ONLY) $60,500

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

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
COVER STUDIO 504 MAIN STREET JOHNSTOWN, PA 15901 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	PHOTOGRAPHY EXPENSE REFUND Aggregate Year-to-Date > $	9/30/98	75.00
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)	75.00
TOTAL This Period (last page this line number only)	75.00

FE6AN098

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 2

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 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer INTEREST INTEREST Occupation Aggregate Year-to-Date > $	Date (month, day, year) 7/31/98 8/31/98	Amount of Each Receipt this Period 172.78 172.92
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) 345.70

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

FE8AN.CSB

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 2

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 / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
LAUREL BANK 534 MAIN STREET JOHNSTOWN, PA 15901 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	INTEREST Occupation Aggregate Year-to-Date $	9/30/98	144.47
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)	144.47
TOTAL This Period (last page this line number only)	490.17

FE5AN028

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
LAUREL BANK 534 MAIN STREET JOHNSTOWN, PA 15901	PAYROLL TAXES PAYROLL TAXES PAYROLL TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/09/98 7/23/98 8/06/98	663.03 89.97 455.49
B. Full Name, Mailing Address and ZIP Code LAUREL BANK 534 MAIN STREET JOHNSTOWN,PA 15901	Purpose of Disbursement PAYROLL TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/03/98	Amount of Each Disbursement This Period 460.08
C. Full Name, Mailing Address and ZIP Code MARY CATHERINE VOYTKO 920 FRONHEISER STREET JOHNSTOWN, PA 15902	Purpose of Disbursement WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/09/98 8/06/98 9/03/98	Amount of Each Disbursement This Period 63.22 63.22 63.22
D. Full Name, Mailing Address and ZIP Code JOSEPH SCHATZDORFER 220 BEDFORD STREET JOHNSTOWN, PA 15901	Purpose of Disbursement WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/09/98 7/16/98 7/23/98	Amount of Each Disbursement This Period 24.98 40.62 44.90
E. Full Name, Mailing Address and ZIP Code JOSEPH SCHATZDORFER 220 BEDFORD STREET JOHNSTOWN, PA 15901	Purpose of Disbursement WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/30/98 8/06/98 8/13/98	Amount of Each Disbursement This Period 47.17 44.90 49.43
F. Full Name, Mailing Address and ZIP Code JOSEPH SCHATZDORFER 220 BEDFORD SDREET JOHNSTOWN, PA 15901	Purpose of Disbursement WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8/20/98 8/27/98 9/03/98	Amount of Each Disbursement This Period 42.63 47.16 49.44
G. Full Name, Mailing Address and ZIP Code JOSEPH SCHATZDORFER 220 BEDFORD STREET JOHNSTOWN, PA 15901	Purpose of Disbursement WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/10/98	Amount of Each Disbursement This Period 44.90
H. Full Name, Mailing Address and ZIP Code COMMUNITY FOUNDATION 216 FRANKLIN ST., SUITE 606 JOHNSTOWN, PA 15901	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/09/98	Amount of Each Disbursement This Period 200.00
I. Full Name, Mailing Address and ZIP Code SOMERSET DAILY AMERICAN 10K RACE 334 WEST MAIN ST., P. O. BOX 638 SOMERSET, PA 15501	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/09/98	Amount of Each Disbursement This Period 1,500.00

SUBTOTAL of Disbursements This Page (optional) 3,994.36

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

FE6A/9288

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
ED MITCHELL COMM. 126 SOUTH FRANKLIN P. O. BOX 2237 WILKES BARRE, PA 18703	ADVERTISING ADVERRISING ADVERTISING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/09/98 8/06/98 9/03/98	5,000.00 5,000.00 5,000.00
B. Full Name, Mailing Address and ZIP Code GOLD KEY LEASE 300 OXFORD DRIVE - SUITE 310 MONROEVILLE, PA 15146	Purpose of Disbursement VEHICLE RENTAL VEHICLE RENTAL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/09/98 8/06/98	Amount of Each Disbursement This Period 603.30 603.30
C. Full Name, Mailing Address and ZIP Code FEDERAL EXPRESS P. O. BOX 1140 MEMPHIS, TN 38101-1140	Purpose of Disbursement FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/09/98	Amount of Each Disbursement This Period 22.25
D. Full Name, Mailing Address and ZIP Code SCHRADER GREENHOUSE 2078 BEDFORD STREET JOHNSTOWN, PA 15904	Purpose of Disbursement FLORAL ARRANGEMENTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/09/98	Amount of Each Disbursement This Period 79.50
E. Full Name, Mailing Address and ZIP Code LaPORTA'S 312 WASHINGTON STREET JOHNSTOWN, PA 15901	Purpose of Disbursement FLORAL ARRANGEMENTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/09/98	Amount of Each Disbursement This Period 44.28
F. Full Name, Mailing Address and ZIP Code ROUSE'S 3908 BIGLER AVENUE BARNESBORO, PA 15714	Purpose of Disbursement FLORAL ARRANGEMENTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/09/98	Amount of Each Disbursement This Period 42.40
G. 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) 7/09/98 8/06/98 9/10/98	Amount of Each Disbursement This Period 1,300.00 1,300.00 1,300.00
H. Full Name, Mailing Address and ZIP Code AT&T P. O. BOX 371430 PITTSBURGH, PA 15250-7430	Purpose of Disbursement TELEPHONE TELEPHONE TELEPHONE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/09/98 8/06/98 9/03/98	Amount of Each Disbursement This Period 229.39 153.23 222.02
I. 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) 7/09/98 8/06/98 9/03/98	Amount of Each Disbursement This Period 55.75 46.76 118.04

SUBTOTAL of Disbursements This Page (optional) 21,120.22

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

E8AN098

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 MBNA-MASTER CARD FOR THE FOLLOWING P. O. BOX 15469 WILMINGTON, DE 19886-5469	CHECK DATED 7/09/98 $1,628.67 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B. Full Name, Mailing Address and ZIP Code EXXON USA JOHNSTOWN, PA	TRAVEL TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/18/98 5/29/98 6/06/98	10.65 12.00 13.50
C. Full Name, Mailing Address and ZIP Code EXXON USA ARLINGTON, VA	TRAVEL TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/23/98 6/01/98 6/09/98	13.00 8.23 8.47
D. Full Name, Mailing Address and ZIP Code SHEETZ, INC. JOHNSTOWN, PA EASYGRADE AUTO WASH JOHNSTOWN, PA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/25/98 5/15/98	9.73 12.00
E. Full Name, Mailing Address and ZIP Code EASYGRADE AUTO WASH JOHNSTOWN, PA	TRAVEL TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/16/98 5/28/98 6/12/98	12.00 12.00 12.00
F. Full Name, Mailing Address and ZIP Code MEMORIAL LIFE SUP PROD JOHNSTOWN, PA THE RITZ CARLTON ARLINGTON, VA	CAMPAIGN OFFICE SUPP. FUND RAISER RECP. EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/28/98 6/03/98	31.64 1,372.59
G. Full Name, Mailing Address and ZIP Code HOSS'S JOHNSTOWN, PA U. S. HOUSE - MEMBERS DIN WASHINGTON, DC	MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/16/98 6/04/98	13.34 33.45
H. Full Name, Mailing Address and ZIP Code EAT N PARK RESTR. JOHNSTOWN, PA	MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/28/98 6/05/98	15.30 15.98
I. Full Name, Mailing Address and ZIP Code HARRIGAN'S JOHNSTOWN, PA	MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/16/98	22.79

SUBTOTAL of Disbursements This Page (optional) 1,628.67

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

FE6AN088

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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-MASTER CARD FOR THE FOLLOWING P. O. BOX 15469 WILMINGTON, DE 19886-5469	CHECK DATED 7/30/98 $250.35 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
EXXON USA JOHNSTOWN, PA EXXON USA JOHNSTOWN, PA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/27/98 7/01/98	19.00 20.50
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
EXXON USA JOHNSTOWN, PA EXXON USA JOHNSTOWN, PA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/03/98 7/09/98	15.50 12.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
EXXON USA ARLINGTON, VA EASYGRADE AUTO WASH JOHNSTOWN, PA	TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/20/98 7/06/98	13.01 12.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
EASYGRADE AUTO WASH JOHNSTOWN, PA K-MART JOHNSTOWN, PA	TRAVEL CAMPAIGN OFFICE SUPP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/09/98 6/23/98	3.25 28.56
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
HARRIGAN'S JOHNSTOWN, PA EAT N PARK RESTR. JOHNSTOWN, PA	MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/21/98 6/22/98	30.52 14.91
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
EAT N PARK RESTR. JOHNSTOWN, PA EAT N PARK RESTR. JOHNSTOWN, PA	MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/04/98 7/10/98	13.70 15.66
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LOMBARDO'S JOHNSTOWN, PA	MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/12/98	51.74
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) 250.35

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

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-MASTER CARD FOR THE FOLLOWING: P. O. BOX 15469 WILMINGTON, DE 19886-5469	CHECK DATED 9/03/98 $2,621.80 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B. Full Name, Mailing Address and ZIP Code SHEETZ, INC. JOHNSTOWN, PA EXXON USA JOHNSTOWN, PA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/19/98 8/07/98	Amount of Each Disbursement This Period 14.00 8.50
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) 8/07/98 8/12/98	Amount of Each Disbursement This Period 13.00 11.35
D. Full Name, Mailing Address and ZIP Code EXXON USA DONEGAL, PA EXXON USA ARLINGTON, VA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/20/98 7/17/98	Amount of Each Disbursement This Period 10.91 13.54
E. Full Name, Mailing Address and ZIP Code EXXON USA FREDERICK, MD EXXON USA BREEZEWOOD, PA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/25/98 8/03/98	Amount of Each Disbursement This Period 11.81 8.39
F. Full Name, Mailing Address and ZIP Code EXXON USA BREEZEWOOD, PA EXXON USA ARLINGTON, VA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8/07/98 8/16/98	Amount of Each Disbursement This Period 7.84 7.89
G. 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) 7/19/98 8/08/98	Amount of Each Disbursement This Period 12.00 12.00
H. Full Name, Mailing Address and ZIP Code EASYGRADE AUTO WASH JOHNSTOWN, PA AMERICAN WASHINGTON, DC	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8/12/98 7/17/98	Amount of Each Disbursement This Period 12.00 186.00
I. Full Name, Mailing Address and ZIP Code U. S. HOUSE - MEMBERS DIN WASHINGTON, DC U. S. HOUSE - MEMBERS DIN WASHINGTON, DC	Purpose of Disbursement MEETING EXPENSE MEETING EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/16/98 7/23/98	Amount of Each Disbursement This Period 69.40 36.20
		SUBTOTAL of Disbursements This Page (optional)	434.83
		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-MASTER CARD P. O. BOX 15469 WILMINGTON, DE 19886-5469	FOR THE FOLLOWING (CONTINUED) 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
THE LENOX SHOP MT. PLEASANT, PA WOOD MARKET LTD LAUREL, MD	FUND RAISER RECP. EXP. FUND RAISER RECP. EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/22/98 8/13/98	355.91 495.39
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
HARRIGAN'S JOHNSTOWN, PA EAT N PARK RESTR. JOHNSTOWN, PA	MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/19/98 7/25/98	26.32 19.87
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
EAT N PARK RESTR. JOHNSTOWN, PA EAT N PARK RESTR. JOHNSTOWN, PA	MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/09/98 8/10/98	13.60 21.75
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
STAPLES JOHNSTOWN, PA	CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/25/98	1,254.13
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) 2,186.97

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
UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	FREIGHT FREIGHT FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/09/98 7/23/98 7/30/98	30.75 57.25 45.50
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	FREIGHT FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/06/98 8/20/98	152.75 126.59
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	FREIGHT FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/03/98 9/10/98	198.16 38.00
D. 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 UTILITIES UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/09/98 7/30/98 8/06/98	26.22 66.97 26.12
E. 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 UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/13/98 9/03/98	60.73 87.24
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WESTMORELAND MUSEUM OF ART GREENSBURG, PA 15601	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/09/98	1,000.00
G. 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)	7/16/98 7/30/98 8/13/98	522.76 522.76 522.76
H. 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 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/27/98 9/10/98	522.76 522.76
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NATIONAL FINANCE CENTER DPRS BILLING UNIT P. O. BOX 61760 NEW ORLEANS, LA 70161	EMP. BENEFITS-HOSP. EMP. BENEFITS-HOSP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/16/98 8/20/98	98.54 98.54

SUBTOTAL of Disbursements This Page (optional) 4,727.16

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
TRIBUNE REVIEW 622 CABIN HILL DRIVE GREENSBURG, PA 15601	SUBSCRIPTION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/16/98	119.60
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
GREATER JOHNSTOWN WATER AUTH. P. O. BOX 1287 JOHNSTOWN, PA 15907-1287	UTILITIES UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/16/98 8/13/98	2.75 2.75
C. 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)	7/16/98 8/20/98	32.92 32.89
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BOISE CASCADE 1360 ISLAND AVENUE McKEES ROCKS, PA 15136	CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/16/98	24.50
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LEADER TIMES P. O. BOX 978 115-121 N. GRANT AVENUE KITTANNING, PA 16201	SUBSCRIPTION SUBSCRIPTION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/16/98 7/30/98	125.00 125.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SHARKEY'S BUCKNELL AVE. & MILLCREEK RD. JOHNSTOWN, PA 15905	TRAVEL-GASOLINE TRAVEL-GASOLINE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/16/98 8/20/98	170.10 180.78
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JAMES OSWALD 307 STATE STREET, APT. B-10 JOHNSTOWN, PA 15905	MEALS & CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/16/98	76.26
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JAMES OSWALD 307 STATE STREET, APT. B-10 JOHNSTOWN, PA 15905	TRAVEL, MEALS & CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/20/98	52.13
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BUDGET PRINTING 126 MARKET STREET JOHNSTOWN, PA 15901	CAMPAIGN OFFICE SUPPLIES Disbursement for ☐ Primary ☐ General ☐ Other (specify)	7/16/98	25.00

SUBTOTAL of Disbursements This Page (optional) 969.68

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

FEC FORM 3 (6/98)

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
PEG SHEPLER WEST VINCENT ST. LIGONIER, PA	REIMBURSEMENT FOR STAMPED ENVELOPES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/16/98	172.00
B. Full Name, Mailing Address and ZIP Code PA UC FUND LABOR & INDUSTRY BUILDING SEVENTH & FORSTER STREETS P. O. BOX 68568 HARRISBURG, PA 17106-8568	Purpose of Disbursement PAYROLL TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/23/98	Amount of Each Disbursement This Period 107.06
C. Full Name, Mailing Address and ZIP Code PA MUNICIPAL SERVICE CO. 468 GOUCHER STREET JOHNSTOWN, PA 15905	Purpose of Disbursement LOCAL TAX W/H Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/23/98	Amount of Each Disbursement This Period 22.50
D. Full Name, Mailing Address and ZIP Code CENTRAL TAX BUREAU OF PA., INC. 1610 BEDFORD STREET JOHNSTOWN, PA 15902	Purpose of Disbursement LOCAL TAX W/H Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/23/98	Amount of Each Disbursement This Period 83.51
E. Full Name, Mailing Address and ZIP Code PA DEPT. OF REVENUE DEPT. 280415 HARRISBURG, PA 17128-0415	Purpose of Disbursement STATE I/T W/H Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/23/98	Amount of Each Disbursement This Period 227.83
F. Full Name, Mailing Address and ZIP Code NEW REPUBLIC 145 CENTER STREET MEYERSDALE, PA	Purpose of Disbursement AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/23/98	Amount of Each Disbursement This Period 100.00
G. Full Name, Mailing Address and ZIP Code JOHNSTOWN REDEVELOPMENT AUTH. 4TH FLOOR-PUBLIC SAFETY BUILDING JOHNSTOWN, PA 15901	Purpose of Disbursement RENT RENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/30/98 9/01/98	Amount of Each Disbursement This Period 660.00 660.00
H. Full Name, Mailing Address and ZIP Code MR. P 915 EAST PITTSBURGH STREET GREENSBURG, PA 15601	Purpose of Disbursement MEETING EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/23/98	Amount of Each Disbursement This Period 1,293.00
I. Full Name, Mailing Address and ZIP Code COVER STUDIO 504 MAIN STREET JOHNSTOWN, PA 15901	Purpose of Disbursement PHOTO EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/23/98	Amount of Each Disbursement This Period 75.00

SUBTOTAL of Disbursements This Page (optional) 3,400.90

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

FE8AH008

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. GTE-NORTH P. O. BOX 31222 TAMPA, FL 33631-3222	TELEPHONE TELEPHONE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/23/98 8/27/98	717.76 732.26
B. CITY OF JOHNSTOWN-BUREAU OF SEWAGE P. O. BOX 608 JOHNSTOWN, PA 15907	UTILITIES UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/23/98 8/20/98	8.16 10.50
C. CRYSTAL CONCEPTS 15 MULLIN AVENUE MT. PLEASANT, PA 15666	FUND RAISER RECEPT. EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/30/98	2,035.20
D. FEDERAL EXPENSE P. O. BOX 1140 MEMPHIS, TN 38101-1140	FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/30/98	22.25
E. BRIER GROUP 116 N. WASHINGTON AVE., SUITE 2B SCRANTON, PA 18503	POLITICAL CONSULTING POLITICAL CONSULTING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/30/98 8/27/98	4,166.67 4,166.67
F. SUSAN O'NEILL & ASSOCIATES 5910 GLOSTER ROAD BETHESDA, MD 20816	PUBLIC RELATIONS EXP. PUBLIC RELATIONS EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/30/98 8/27/98	2,000.00 2,000.00
G. JOHNSTOWN OLDTIMERS BASEBALL ASSOC. 519 GROVE AVENUE JOHNSTOWN, PA 15902	TICKETS & AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/20/98	530.00
H. JOHNSTOWN SYMPHONY 227 FRANKLIN ST., SUITE 302 JOHNSTOWN, PA 15901	AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/20/98	125.00
I. CASH JOHNSTOWN, PA	MEETING EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/20/98	24.99

SUBTOTAL of Disbursements This Page (optional) 16,539.46

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
CASH JOHNSTOWN, PA	VOL. EXP., TICKETS & CAMPAIGN OFFICE SUPP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/27/98	59.91
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
POSTMASTER JOHNSTOWN, PA	POSTAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/20/98	32.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
KIESSNER'S 2227 BEDFORD STREET JOHNSTOWN, PA 15904	FLORAL ARRANGE. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/20/98	83.50
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
POLK ADVERTISING P. O. BOX 77709 DETROIT, MI 48277-0709	CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/20/98	441.45
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DEAN JORDAN, INC. 625 MAIN STREET JOHNSTOWN, PA 15901	VEHICLE REPAIRS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/20/98	268.18
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
REGION 2 UAW 5000 ROCKSIDE ROAD #300 CLEVELAND, OHIO 44131-2174	TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/27/98	100.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NAACP P. O. BOX 1064 JOHNSTOWN, PA 15907	TICKETS & AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/27/98	140.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FLOOD CITY INTERNET 1101 FRANCES STREET JOHNSTOWN, PA 15904	COMPUTER EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/27/98	39.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DAYLILY FLORAL & GIFT SHOP P. O. BOX 403 DAVIDSVILLE, PA 15928	FLORAL ARRANGE. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/27/98	37.10

SUBTOTAL of Disbursements This Page (optional) 1,201.14

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JANWAY 11 ACADEMY ROAD COGAN STATION, PA 17728-9300	CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/27/98	324.44
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
L&D CANDIES 404 MESSENGER STREET JOHNSTOWN, PA 15902	GIFTS GIFTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/27/98 9/10/98	14.30 42.90
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
TRIBUNE REVIEW P. O. BOX 8181 GREENSBURG, PA 15601	AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/27/98	99.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SOMERSET CENTRAL LABOR COUNCIL 2696 E. MUDPIKE ROAD BERLIN, PA 15530	AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/03/98	200.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JOHNSTOWN COMMUNITY CONCERT 157 VIOLET STREET JOHNSTOWN, PA 15905	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/03/98	50.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ARMY NAVY COUNTRY CLUB 2400 S. 18TH STREET ARLINGTON, VA 22204	MEETING EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/03/98	101.39
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
HOLIDAY INN 250 MARKET STREET JOHNSTOWN, PA 15901	MEETING EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/03/98	40.54
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JAMES OSAWLD 307 STATE STREET, APT. B-10 JOHNSTOWN, PA 15905	TRAVEL, MEALS, MEETING & CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	EXPday, year) 9/03/98	199.09
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
COVER STUDIO 504 MAIN STREET JOHNSTOWN,PA	PHOTOGRAPHY EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/03/98	674.50

SUBTOTAL of Disbursements This Page (optional) 1,746.16

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
LAUREL BANK 534 MAIN STREET JOHNSTOWN, PA 15901	BANK CHARGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/05/98	5.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PC SIGNS & PROMOTIONAL 8772 REMINGTON ROAD CINCINNATI, OHIO 45242	ADVERTISING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/10/98	3,260.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NRA c/o PAUL HORNICK 316 BROAD STREET JOHNSTOWN, PA 15906	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/10/98	50.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
STATE WORKMEN'S INSURANCE FUND COMM. OF PA-DEPT. OF LABOR & INDUSTRY 100 LACKAWANNA AVE. P. O. BOX 5100 SCRANTON, PA 18505-5100	WORKMEN'S COMP. INS. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/10/98	219.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
HYATT REGENCY-WASHINGTON 400 NEW JERSEY AVENUE, N.W. WASHINGTON, DC 20001	FUND RAISER RECP. EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/10/98	2,100.00
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)	5,634.00
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	Date (month, day, year)	Amount of Each Disbursement This Period
A. JOSEPH SCHATZDORFER 220 BEDFORD STREET JOHNSTOWN, PA 15901	WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/17/98 9/24/98 9/30/98	44.90 49.44 54.00
B. SHARKEY'S BUCKNELL AVE. & MILLCREEK ROAD JOHNSTOWN, PA 15905	TRAVEL-GASOLINE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/17/98	263.30
C. GOLD KEY LEASE 300 OXFORD DRIVE, SUITE 310 MONROEVILLE, PA 15146	VEHICLE RENTAL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/17/98	603.30
D. DEAN JORDAN, INC. 625 MAIN STREET JOHNSTOWN, PA 15901	VEHICLE REPAIRS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/17/98	21.15
E. BOISE CASCADE 1360 ISLAND AVENUE McKEES ROCKS, PA 15136	CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/17/98	28.43
F. GREATER JOHNSTOWN WATER AUTHORITY P. O. BOX 1287 JOHNSTOWN, PA 15907-1287	UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/17/98	2.75
G. UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	FREIGHT FREIGHT FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/17/98 9/24/98 9/30/98	81.50 98.75 59.90
H. LaPORTA'S 312 WASHINGTON STREET JOHNSTOWN, PA 15901	FLORAL ARRANGE. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/17/98	68.90
I. IKON-IOS CAPITAL P. O. BOX 9115 MACON, GEORGIA 31210	COPIER PAYMENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/17/98	249.61

SUBTOTAL of Disbursements This Page (optional) 1,625.93

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	Date (month, day, year)	Amount of Each Disbursement This Period
A. CABLECOMM P. O. BOX 371464 PITTSBURGH, PA 15250-7464	UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/17/98	32.89
B. BENSHOFF PRINTING 46 VALLEY PIKE JOHNSTOWN, PA 15905	CAMPAIGN OFFICE SUPPLIES & ADVERTISING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/17/98	1,186.14
C. CHRISTIAN BOOK STORE 1238 SCALP AVENUE JOHNSTOWN, PA 15904	CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/17/98	1,030.32
D. CITY OF JOHNSTOWN-BUREAU OF SEWAGE P. O. BOX 608 JOHNSTOWN, PA 15907	UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/17/98	6.21
E. UNITED WAY OF GREATER JOHNSTOWN 111 WALNUT STREET JOHNSTOWN, PA 15901	TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/17/98	40.00
F. THERESA VOYTKO 920 FRONHEISER STREET JOHNSTOWN, PA 15902	WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/24/98	522.76
G. NATIONAL FINANCE CENTER DPRS BILLING UNIT P. O. BOX 61760 NEW ORLEANS, LA 70161	HOSP.-EMPLOYEE BENEFITS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/24/98	98.54
H. SOUTHERN ALLEGHENIES ADV., INC. 667 INDUSTRIAL PARK ROAD EBENSBURG, PA 15931	ADVERTISING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/24/98	300.00
I. WHEELING ATHLETIC & EDUCATION TRUST c/o U. S. NATIONAL BANK-TRUST DEPT. P. O. BOX 520 JOHNSTOWN, PA 15907	TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/24/98	250.00

SUBTOTAL of Disbursements This Page (optional) 3,466.86

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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
GTE-NORTH P. O. BOX 31222 TAMPA, FL 33631-3222	TELEPHONE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/24/98	1,017.23
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MARINE CORPS LEAGUE c/o DENNIS PENTRACK 219 PAULINE ST. JOHNSTOWN, PA 15904	DUES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/24/98	16.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PITTSBURGH POST GAZETTE P. O. BOX 747012 PITTSBURGH, PA 15274-7012	SUBSCRIPTION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/24/98	320.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JAMES OSWALD 307 STATE STREET, APT. B10 JOHNSTOWN, PA 15905	MEALS & CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/24/98	36.68
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ARCADIA PERFORMING ARTS 509 15TH STREET WINDBER, PA 15963	TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/24/98	900.00
F. 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)	9/30/98	116.45
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
STAPLES P. O. BOX 30292 SALT LAKE CITY, UTAH 84130	INT. PAYMENT ON COMPUTER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/30/98	61.49
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FEDERAL EXPRESS P. O. BOX 1140 MEMPHIS, TN 38101-1140	FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/30/98	22.25
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BRIER GROUP 116 N. WASHINGTON AVE., SUITE 2B SCRANTON, PA 18503	POLITICAL CONSULTING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/30/98	4,166.67

SUBTOTAL of Disbursements This Page (optional) 6,656.77

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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 SUSAN O'NEILL & ASSOC. 5910 GLOSTER ROAD BETHESDA, MD 20816	PUBLIC RELATIONS EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/30/98	2,000.00
B. 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
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)	2,000.00
TOTAL This Period (last page this line number only)	77,583.46

FEC/AN088

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 3

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DAVID WU 921 S. W. MORRISON LANE, SUITE 310 PORTLAND, OREGON 97205	CONTRI. Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	7/09/98	1,000.00
B. Full Name, Mailing Address and ZIP Code SANFORD D. BISHOP, JR. FOR CONGRESS P. O. BOX 909 COLUMBUS, GEORGIA 31902	Purpose of Disbursement CONTRI. Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 7/23/98	Amount of Each Disbursement This Period 1,000.00
C. Full Name, Mailing Address and ZIP Code FRIENDS OF LANE EVANS COMMITTEE P. O. BOX 5263 ROCK ISLAND, IL 61265	Purpose of Disbursement CONTRI. Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 7/23/98	Amount of Each Disbursement This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code WESTMORELAND COUNTY DEMOCRATIC COMM. 331 SOUTH MAIN STREET GREENSBURG, PA 15601	Purpose of Disbursement TICKETS Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 7/30/98	Amount of Each Disbursement This Period 100.00
E. Full Name, Mailing Address and ZIP Code FRIENDS OF ALLEN KUKOVICH ATT: STEVE COWAN BOX 521 MANOR, PA 15665	Purpose of Disbursement TICKETS Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 7/30/98	Amount of Each Disbursement This Period 150.00
F. Full Name, Mailing Address and ZIP Code COMMITTEE TO ELECT DAVE TULOWITZKI 603 N. JULIAN ST. EBENSBURG, PA 15931	Purpose of Disbursement TICKETS Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 8/27/98	Amount of Each Disbursement This Period 100.00
G. Full Name, Mailing Address and ZIP Code INDIANA COUNTY DEMOCRAT COMM. P. O. BOX 315 INDIANA, PA 15701	Purpose of Disbursement CONTRI. Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 8/27/98	Amount of Each Disbursement This Period 2,500.00
H. Full Name, Mailing Address and ZIP Code TOM TANGRETTI COMMITTEE P. O. BOX 292 GREENSBURG, PA 15601	Purpose of Disbursement TICKETS Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 8/27/98	Amount of Each Disbursement This Period 125.00
I. Full Name, Mailing Address and ZIP Code FRIENDS OF DON BEVILL 1112 SIXTH AVE. JASPER, AL 35504	Purpose of Disbursement CONTRI. Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 9/03/98	Amount of Each Disbursement This Period 1,000.00

SUBTOTAL of Disbursements This Page (optional) 6,975.00

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

FE8AN098

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 3

FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code SNYDER FOR CONGRESS P. O. BOX 250998 LITTLE ROCK, AK 72225	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/03/98	Amount of Each Disbursement This Period 1,000.00
B. Full Name, Mailing Address and ZIP Code PA VICTORY 98 1 PRESIDENTIAL BLVD. BALA CYWNYD, PA 19004	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/03/98	Amount of Each Disbursement This Period 1,000.00
C. Full Name, Mailing Address and ZIP Code REPRESENTATIVE TIM PESCI 593 FRANKLIN STREET FREEPORT, PA 16229	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/10/98	Amount of Each Disbursement This Period 200.00
D. Full Name, Mailing Address and ZIP Code NATIONAL DEMOCRATIC CLUB 30 IVY STREET, S.E. WASHINGTON, DC 20003-4071	Purpose of Disbursement IN KIND CONTRI.-FUND RAISING MEETING BILL LLOYD FOR U S SENATE P. O. BOX 462 HARRISBURG, PA 17108 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/23/98	Amount of Each Disbursement This Period 197.89
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) 2,397.89

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

FE6AN098

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 3

FOR LINE NUMBER 21

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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
BILL LLOYD FOR U. S. SENATE P. O. BOX 462 HARRISBURG, PA 17108	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/24/98	602.11
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CASEY FOR CONGRESS COMM. 254 WYOMING AVENUE SCRANTON, PA 18503	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/24/98	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CONG. JIM MALONEY c/o FRIENDS OF JIM MALONEY 240 MAIN ST., SUITE 3 DANBURY, CONN 06810	CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/24/98	1,000.00
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) 2,602.11

TOTAL This Period (last page this line number only) 11,975.00

FEGAN98

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		$630.47 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	Name of Employer / Occupation / Amount Guaranteed Outstanding: $
3. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Amount Guaranteed Outstanding: $

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

SUBTOTALS This Period This Page (optional)	630.47
TOTALS This Period (last page in this line only)	630.47

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 Committee	C 0 0 4 1 3 4 3 0 0 0 1 9 0 7 5

FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER)

MBNA AMERICA
1000 SAMOSET DRIVE
WILMINGTON DE 19884-0404

AMOUNT OF LOAN: MasterCard Account 720,000
INTEREST RATE (APR): 17.9%
DATE INCURRED OR ESTABLISHED: 02/27/98
DATE DUE: Revolving

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

B. If line of credit, amount of this draw: NA ; total outstanding balance: $630.47 9/30/98
Total Committee $50,000

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 P Murtha

G. COMMITTEE TREASURER

TYPED NAME: ROBERT C. ONDICK

SIGNATURE: Robert C. Ondick

DATE: 10/13/98

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 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.

AUTHORIZED REPRESENTATIVE

TYPED NAME: J. Mathews Cockett

SIGNATURE: J. Mathews Cockett

TITLE: Assistant Manager

DATE: 10/08/98

FE6AN144

12/91

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
MURTHA FOR CONGRESS COMMITTEE				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor DAILY AMERICAN 10K RACE 334 WEST MAIN STREET P.O. BOX 638 SOMERSET, PA 15501	1,500.00	-0-	1,500.00	-0-
Nature of Debt (Purpose): CONTRI.				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor STAPLES CREDIT PLAN P. O. BOX 30292 SALT LAKE CITY, UTAH 84130	-0-	3,315.62	1,315.62	2,000.00
Nature of Debt (Purpose): COMPUTER & ACCESSORIES				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor IKON-IOS CAPITAL P. O. BOX 9115 MACON, GEORGIA 31210	-0-	2,995.32	249.61	2,745.71
Nature of Debt (Purpose): LEASE PAYMENT PHOTOCOPIER & ACCESSORIES				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor VOID				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor VOID				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor VOID				
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	4,745.71
2) TOTALS This Period (last page in this line only)	4,745.71
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	630.47
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	5,376.18

FE5AN088

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 10/13/98
☐	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	

J.A.Q.
PREPARER

10/18/98
DATE PREPARED

(4/98)