

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

PEOPLE FOR PLATTS COMMITTEE

ADDRESS (number and street)

625 OLMSTEAD WAY

Check if different than previously reported. (ACC)

YORK

PA

17404

2. FEC IDENTIFICATION NUMBER

C00343376

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT NEW OR AMENDED

PA 19

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

In the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 07 01 2004 through 09 30 2004

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 Kenneth D. Wingert

Signature of Treasurer Electronically Filed by Kenneth D. Wingert Date 10 09 2004

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

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

PEOPLE FOR PLATTS COMMITTEE

Report Covering the Period: From: M M D D Y Y Y Y To: M M D D Y Y Y Y
0 7 0 1 2 0 0 4 0 9 3 0 2 0 0 4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a)).....	31970.00	163487.07
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	31970.00	163387.07
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	5425.00	34983.99
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	50.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	5425.00	34933.99
8. Cash on Hand at Close of Reporting Period (from Line 27).....	84295.76	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name
PEOPLE FOR PLATTS COMMITTEE

Report Covering the Period: From: ^{M M} 0 7 ^{D J} 0 1 ^{Y Y Y Y} 2 0 0 4 To: ^{V V} 0 9 ^{U J} 3 0 ^{Y Y Y Y} 2 0 0 4

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	31700.00	
(i) Itemized (use Schedule A).....	270.00	
(ii) Unitemized.....		
(iii) TOTAL of contributions	31970.00	163487.07
from individuals..... ▶		
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	31970.00	163487.07
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	50.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	157.40	769.56
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	32127.40	164306.63

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	5425.00	34983.99
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
<hr/>		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	100.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	100.00
<hr/>		
21. OTHER DISBURSEMENTS.....	82512.72	101733.07
<hr/>		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) [>]	87937.72	136817.06

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	140106.08
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	32127.40
25. SUBTOTAL (add Line 23 and Line 24).....	172233.48
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	87937.72
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	84295.76

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

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

FOR LINE NUMBER: PAGE 6 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial) A. Louis J. Appell, Jr.		Date of Receipt M / D / Y 09 / 17 / 2004
Mailing Address 1700 Powder Mill Road		Transaction ID: SA11A1.15830
City York	State PA	Zip Code 17404
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Susquehanna Pflitzgraff Co. Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation Business Executive Election Cycle-to-Date ▼ 4000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Craig Balsam		Date of Receipt M / D / Y 07 / 09 / 2004
Mailing Address 82 Beach Street		Transaction ID: SA11A1.15818
City New York	State NY	Zip Code 10013
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Razor & Tie Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation Business Executive Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. W. Dale Brougher		Date of Receipt M / D / Y 09 / 24 / 2004
Mailing Address 1200 Country Club Road		Transaction ID: SA11A1.15913
City York	State PA	Zip Code 17403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer retired Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation retired Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial) A. Denise Garner		Date of Receipt M / D / Y 09 / 17 / 2004
Mailing Address 115D Wyndsong Drive		Transaction ID: SA11A1.15931
City York	State PA	Zip Code 17403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation Housewife	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Edward M. Garner		Date of Receipt M / D / Y 09 / 17 / 2004
Mailing Address 115D Wyndsong Drive		Transaction ID: SA11A1.15828
City York	State PA	Zip Code 17403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Voith Siemens Hydro	Occupation Executive V.P.	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3100.00	

Full Name (Last, First, Middle Initial) C. Mr. George H. Glatfelter, II		Date of Receipt M / D / Y 09 / 30 / 2004
Mailing Address 7052 Woodland Drive		Transaction ID: SA11A1.15923
City Spring Grove	State PA	Zip Code 17362
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer PH Glatfelter Co.	Occupation Executive	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 7 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial) A. David Kaplan		Date of Receipt M / D / Y 07 / 09 / 2004
Mailing Address 170 W. 74th Street Apt. 1110		Transaction ID: SA11A1.15820
City New York	State NY	Zip Code 10023
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Kaplan Realty	Occupation Business Executive	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Robert A. Kinsley		Date of Receipt M / D / Y 09 / 17 / 2004
Mailing Address 27220 Water Street		Transaction ID: SA11A1.15827
City York	State PA	Zip Code 17403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Kinsley Construction Co	Occupation Business Executive	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. LeRoy D. Kline		Date of Receipt M / D / Y 09 / 17 / 2004
Mailing Address 1709 Olmstead Way West		Transaction ID: SA11A1.15833
City Camp Hill	State PA	Zip Code 17011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Delta Development Group, Inc.	Occupation President	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial) A. David Leinwand		Date of Receipt M / D / Y Y Y Y 07 / 09 / 2004	
Mailing Address 1735 York Ave Apt. 6H		Transaction ID: SA11A1.15819	
City State Zip Code New York NY 10128	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer Black Rock	Occupation Business Executive	Election Cycle-to-Date ▼ 1000.00	
Receipt For: 2004 Primary X General Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Sam Levine		Date of Receipt M / D / Y Y Y Y 07 / 09 / 2004	
Mailing Address 16 W. 89th Street Apt 203		Transaction ID: SA11A1.15815	
City State Zip Code New York NY 10023	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer EOS Partners	Occupation Business Executive	Election Cycle-to-Date ▼ 1000.00	
Receipt For: 2004 Primary X General Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Robert Marguette		Date of Receipt M / D / Y Y Y Y 09 / 23 / 2004	
Mailing Address 2241 Mockingbird Road		Transaction ID: SA11A1.15909	
City State Zip Code Harrisburg PA 17112	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Name of Employer Members 1st Federal Credit Uni	Occupation President/CEO	Election Cycle-to-Date ▼ 1000.00	
Receipt For: 2004 Primary X General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 9 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial) A. Barry McGee		Date of Receipt M / D / Y 09 / 30 / 2004
Mailing Address 129 Bremen Lane		Transaction ID: SA11A1.15926
City McMurray	State PA	Zip Code 15317
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Richard D. Poole		Date of Receipt M / D / Y 09 / 17 / 2004
Mailing Address 890 Glenwood Drive		Transaction ID: SA11A1.15834
City York	State PA	Zip Code 17403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Richard D. Poole, Inc.	Occupation General Contractor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1350.00	

Full Name (Last, First, Middle Initial) C. Robert Raabn		Date of Receipt M / D / Y 07 / 09 / 2004
Mailing Address 101D Northern Blvd, Suite 34D		Transaction ID: SA11A1.15814
City Great Neck	State NY	Zip Code 11021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SB Capital Group	Occupation Business Executive	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 32
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial) A. Keith Rosenbloom		Date of Receipt M / D / Y 07 / 09 / 2004
Mailing Address 10 East 13th Street Apt. PHJ		Transaction ID: SA11A1.15821
City New York	State NY	Zip Code 10003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Care Advisors	Occupation Portfolio Manager	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Douglas Schmit		Date of Receipt M / D / Y 09 / 22 / 2004
Mailing Address 838 Heritage Hills Drive		Transaction ID: SA11A1.15888
City York	State PA	Zip Code 17402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer self-employed	Occupation Dentist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Bryan M. Segelman		Date of Receipt M / D / Y 09 / 17 / 2004
Mailing Address 3730 Rimrock Road		Transaction ID: SA11A1.15831
City York	State PA	Zip Code 17402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer self-employed	Occupation Periodontist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial) A. William H. Simpson		Date of Receipt M / D / Y 09 / 17 / 2004
Mailing Address 2532 Hepplewhite Drive		Transaction ID: SA11A1.15836
City York	State PA	Zip Code 17404
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Pfaltzgraf Co.	Occupation Manager	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1550.00	

Full Name (Last, First, Middle Initial) B. Royce E. Skaggs		Date of Receipt M / D / Y 09 / 17 / 2004
Mailing Address 805 Hickory Hill Lane		Transaction ID: SA11A1.15837
City York	State PA	Zip Code 17402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Richard W. Stewart		Date of Receipt M / D / Y 09 / 17 / 2004
Mailing Address 1811 Warren Street		Transaction ID: SA11A1.15835
City New Cumberland	State PA	Zip Code 17070
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Johnson Duffie Stewart We- Idan	Occupation Attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1125.00	

SUBTOTAL of Receipts This Page (optional)	▶	2200.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial) A. Kurt E. Suter		Date of Receipt M / D / Y 09 / 17 / 2004
Mailing Address 322 S. Hanover Street		Transaction ID: SA11A1.15832
City Carlisle	State PA	Zip Code 17013
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer self-employed Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation Real Estate Development Election Cycle-to-Date ▼ 1750.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Timothy R. Tate		Date of Receipt M / D / Y 09 / 30 / 2004
Mailing Address 1320 Hilltop Place		Transaction ID: SA11A1.15925
City York	State PA	Zip Code 17403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Stewart & Tate, Inc. Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation Executive Election Cycle-to-Date ▼ 1250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Jeff Versheller		Date of Receipt M / D / Y 07 / 09 / 2004
Mailing Address 830 Park Ave Apt 1B		Transaction ID: SA11A1.15818
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Bear Stearns Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation Business Executive Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 13 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial) A. Brenda Vizi		Date of Receipt 09 / 30 / 2004
Mailing Address 984 Summit Circle N.		Transaction ID: SA11A1.15924
City York	State PA	Zip Code 17403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer York Wall Coverings	Occupation Executive	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Charles S. Wolf, Jr.		Date of Receipt 09 / 30 / 2004
Mailing Address 303 Gravel Hill Road		Transaction ID: SA11A1.15922
City Mount Wolf	State PA	Zip Code 17347
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer York Container	Occupation Executive	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) C. Thomas W. Wolf		Date of Receipt 09 / 17 / 2004
Mailing Address PO Box 504		Transaction ID: SA11A1.15829
City Mount Wolf	State PA	Zip Code 17347
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer The Wolf Organization	Occupation President	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

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

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

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(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
	12		13a		13b		14		

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial) A. Sara Wolfensohn		Date of Receipt MM / DD / YYYY 07 / 09 / 2004	
Mailing Address 257 Central Park West		Transaction ID: SA11A1.15817	
City New York	State NY	Zip Code 10024	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1A)-1)	
Name of Employer Wolfensohn Foundation	Occupation Business Executive	Election Cycle-to-Date 2004	1000.00
Receipt For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	31700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 32

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial) A. Heritage Federal Credit Union		Date of Receipt M / D / Y 07 / 30 / 2004
Mailing Address 2400 Pleasant Valley Road		Transaction ID: SA15.15822
City York	State PA	Zip Code 17403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 58.37
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 670.53	

Full Name (Last, First, Middle Initial) B. Heritage Federal Credit Union		Date of Receipt M / D / Y 08 / 31 / 2004
Mailing Address 2400 Pleasant Valley Road		Transaction ID: SA15.15823
City York	State PA	Zip Code 17403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 56.20
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 728.73	

Full Name (Last, First, Middle Initial) C. Heritage Federal Credit Union		Date of Receipt M / D / Y 09 / 30 / 2004
Mailing Address 2400 Pleasant Valley Road		Transaction ID: SA15.15914
City York	State PA	Zip Code 17403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.83
Name of Employer	Occupation	Dividend Income Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 769.58	

SUBTOTAL of Receipts This Page (optional)	▶	157.40
TOTAL This Period (last page this line number only)	▶	157.40

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)

A. AT&T Wireless

Mailing Address PO Box 129

City Newark State NJ Zip Code 17101

Purpose of Disbursement
Cell Phone Service

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15797

Date of Disbursement

07 / 23 / 2004

Amount of Each Disbursement this Period

298.73

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. AT&T Wireless

Mailing Address PO Box 129

City Newark State NJ Zip Code 17101

Purpose of Disbursement
Cellular Telephone Service

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15862

Date of Disbursement

08 / 20 / 2004

Amount of Each Disbursement this Period

42.69

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. AT&T Wireless

Mailing Address PO Box 129

City Newark State NJ Zip Code 17101

Purpose of Disbursement
Cellular Telephone Service

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15890

Date of Disbursement

09 / 22 / 2004

Amount of Each Disbursement this Period

88.25

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

429.67

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Delta Air Lines

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320

Purpose of Disbursement
Transportation

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15851

Date of Disbursement

07 / 27 / 2004

Amount of Each Disbursement this Period

498.38

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. NeFra

Mailing Address 3433 E. Market Street

City York State PA Zip Code 17402

Purpose of Disbursement
Printing Service

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15861

Date of Disbursement

09 / 10 / 2004

Amount of Each Disbursement this Period

204.05

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Office Max

Mailing Address 2435 East Market Street

City York State PA Zip Code 17402

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15876

Date of Disbursement

09 / 07 / 2004

Amount of Each Disbursement this Period

25.41

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

727.84

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Postmaster of Lancaster

Mailing Address 1400 Harrisburg Pike

City Lancaster State PA Zip Code 17604

Purpose of Disbursement
Bulk Mailing Permit

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15856
Date of Disbursement

08 / 13 / 2004

Amount of Each Disbursement this Period

150.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. Postmaster of York

Mailing Address 30 S. George Street

City York State PA Zip Code 17404

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15796
Date of Disbursement

07 / 29 / 2004

Amount of Each Disbursement this Period

37.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. Postmaster of York

Mailing Address 30 S. George Street

City York State PA Zip Code 17404

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15878
Date of Disbursement

09 / 08 / 2004

Amount of Each Disbursement this Period

37.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

224.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Postmaster of York

Mailing Address 90 S. George Street

City York State PA Zip Code 17404

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15879
Date of Disbursement

09 / 10 / 2004

Amount of Each Disbursement this Period

97.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. Staples

Mailing Address 665 Loucks Street

City York State PA Zip Code 17404

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15882
Date of Disbursement

09 / 09 / 2004

Amount of Each Disbursement this Period

85.52

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. Suscom

Mailing Address 221 W. Philadelphia Ave

City York State PA Zip Code 17404

Purpose of Disbursement
Internet Service Provider

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15792
Date of Disbursement

07 / 17 / 2004

Amount of Each Disbursement this Period

30.18

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

212.71

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Suscom

Mailing Address 221 W. Phildelphia Ave

City York State PA Zip Code 17404

Purpose of Disbursement
Internet Service Provider

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15844

Date of Disbursement

07 / 30 / 2004

Amount of Each Disbursement this Period

41.06

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Suscom

Mailing Address 221 W. Phildelphia Ave

City York State PA Zip Code 17404

Purpose of Disbursement
Internet Service Provider

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15886

Date of Disbursement

09 / 10 / 2004

Amount of Each Disbursement this Period

40.96

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Suscom

Mailing Address 221 W. Phildelphia Ave

City York State PA Zip Code 17404

Purpose of Disbursement
Internet Service Provider

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15917

Date of Disbursement

09 / 30 / 2004

Amount of Each Disbursement this Period

41.06

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

123.06

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
 (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
 PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)
 A. The YorkTowne Hotel

Mailing Address 48 E. Market Street

City York State PA Zip Code 17405

Purpose of Disbursement
 Catering

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB17.1588D
 Date of Disbursement

09 / 11 / 2004

Amount of Each Disbursement this Period

193.77

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
 B. US House Gift Shop

Mailing Address B217, Longworth Building

City Washington State DC Zip Code 20515

Purpose of Disbursement
 Door Prizes

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB17.1591B
 Date of Disbursement

09 / 30 / 2004

Amount of Each Disbursement this Period

183.60

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
 C. Verizon

Mailing Address PO Box 31122

City Tampa State FL Zip Code 33631

Purpose of Disbursement
 Phone Service

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB17.15794
 Date of Disbursement

07 / 11 / 2004

Amount of Each Disbursement this Period

31.45

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

408.82

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address PO Box 31122

City Tampa State FL Zip Code 33631

Purpose of Disbursement
Phone Service

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15795

Date of Disbursement

07 / 23 / 2004

Amount of Each Disbursement this Period

18.03

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Verizon

Mailing Address PO Box 31122

City Tampa State FL Zip Code 33631

Purpose of Disbursement
Telephone Service

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15884

Date of Disbursement

07 / 30 / 2004

Amount of Each Disbursement this Period

113.25

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Verizon

Mailing Address PO Box 31122

City Tampa State FL Zip Code 33631

Purpose of Disbursement
Telephone Service

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15877

Date of Disbursement

09 / 07 / 2004

Amount of Each Disbursement this Period

23.82

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

154.90

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address PO Box 31122

City Tampa State FL Zip Code 33631

Purpose of Disbursement
Telephone Service

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15885

Date of Disbursement

09 / 16 / 2004

Amount of Each Disbursement this Period

114.24

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address PO Box 17464

City Baltimore State MD Zip Code 21207

Purpose of Disbursement
Cell Phone Service

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15793

Date of Disbursement

07 / 11 / 2004

Amount of Each Disbursement this Period

99.01

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address PO Box 17464

City Baltimore State MD Zip Code 21207

Purpose of Disbursement
Cellular Telephone Service

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15845

Date of Disbursement

07 / 28 / 2004

Amount of Each Disbursement this Period

59.50

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

272.75

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 17464

City Baltimore State MD Zip Code 21297

Purpose of Disbursement
Cellular Telephone Service

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15853

Date of Disbursement

08 / 11 / 2004

Amount of Each Disbursement this Period

99.01

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address PO Box 17464

City Baltimore State MD Zip Code 21297

Purpose of Disbursement
Cellular Telephone Service

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15864

Date of Disbursement

08 / 28 / 2004

Amount of Each Disbursement this Period

42.27

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address PO Box 17464

City Baltimore State MD Zip Code 21297

Purpose of Disbursement
Cellular Telephone Service

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15883

Date of Disbursement

08 / 16 / 2004

Amount of Each Disbursement this Period

96.14

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

237.42

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 17464

City Baltimore State MD Zip Code 21297

Purpose of Disbursement
Cellular Phone Service

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15915

Date of Disbursement

09 / 30 / 2004

Amount of Each Disbursement this Period

100.17

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. White House Airlift Operations

Mailing Address 1201 S. Eads Street
#314

City Arlington State VA Zip Code 22202

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15918

Date of Disbursement

09 / 30 / 2004

Amount of Each Disbursement this Period

1757.25

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Kenneth D. Wingert

Mailing Address 625 Olmstead Way

City York State PA Zip Code 17404

Purpose of Disbursement
Reimbursement- office Equipment

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15843

Date of Disbursement

07 / 30 / 2004

Amount of Each Disbursement this Period

211.98

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2069.40

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Kenneth D. Wingert

Mailing Address 625 Olmstead Way

City York State PA Zip Code 17404

Purpose of Disbursement
Reimbursement- Convention Deposit

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15896

Date of Disbursement

09 / 22 / 2004

Amount of Each Disbursement this Period

200.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. York Calculator & Business Equipment

Mailing Address 1240 E. Philadelphia Street

City York State PA Zip Code 17403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15899

Date of Disbursement

09 / 22 / 2004

Amount of Each Disbursement this Period

31.90

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. York County Republican Committee

Mailing Address 37 W. Market Street

City York State PA Zip Code 17401

Purpose of Disbursement
Program Advertisement

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.15898

Date of Disbursement

09 / 22 / 2004

Amount of Each Disbursement this Period

125.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

356.90

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

5217.49

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
 PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Adams County Council of Republican Women

Mailing Address PO Box 3664

City Gettysburg State PA Zip Code 17325

Purpose of Disbursement
 Donation

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: SB21.15865
 Date of Disbursement
 08 / 27 / 2004

Amount of Each Disbursement this Period
 27.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. Adams County Republican Committee

Mailing Address 395 Buford Avenue

City Gettysburg State PA Zip Code 17325

Purpose of Disbursement
 Family Picnic Ticket

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: SB21.15810
 Date of Disbursement
 07 / 16 / 2004

Amount of Each Disbursement this Period
 10.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. Adams County Republican Committee

Mailing Address 395 Buford Avenue

City Gettysburg State PA Zip Code 17325

Purpose of Disbursement
 Donation

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: SB21.15841
 Date of Disbursement
 08 / 13 / 2004

Amount of Each Disbursement this Period
 1000.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ **1037.00**

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
 (check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
 PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Adams County Republican Committee

Mailing Address 395 Buford Avenue

City Gettysburg State PA Zip Code 17325

Purpose of Disbursement
 Donation

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB21.15887

Date of Disbursement

09 / 17 / 2004

Amount of Each Disbursement this Period

175.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. Adams County Republican Committee

Mailing Address 395 Buford Avenue

City Gettysburg State PA Zip Code 17325

Purpose of Disbursement
 Fall Dinner Tickets

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB21.15920

Date of Disbursement

09 / 30 / 2004

Amount of Each Disbursement this Period

75.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. CHARLIE DENT FOR CONGRESS

Mailing Address PO Box 442

City Allentown State PA Zip Code 18105

Purpose of Disbursement
 Donation

Candidate Name

Office Sought: X House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: PA District 15

Category/
 Type

Transaction ID: SB21.15904

Date of Disbursement

08 / 23 / 2004

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1250.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
 (check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
 PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Cumberland County Republican Committee

Mailing Address Po Box 1155

City Carlisle State PA Zip Code 17013

Purpose of Disbursement
 Summer Roundup Tickets

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB21.15861

Date of Disbursement

08 / 20 / 2004

Amount of Each Disbursement this Period

50.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. Cumberland County Republican Committee

Mailing Address Po Box 1155

City Carlisle State PA Zip Code 17013

Purpose of Disbursement
 Advertising

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB21.15921

Date of Disbursement

09 / 30 / 2004

Amount of Each Disbursement this Period

100.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. FITZPATRICK FOR CONGRESS

Mailing Address POST OFFICE BOX 1772

City DOYLESTOWN State PA Zip Code 18901

Purpose of Disbursement
 Donation

Candidate Name

Office Sought: x House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: PA District 08

Category/
 Type

Transaction ID: SB21.15906

Date of Disbursement

09 / 10 / 2004

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1150.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)

A. Patrick Fleagle

Mailing Address 116 West Main Street

City State Zip Code
Waynesboro PA 17268

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB21.15855

Date of Disbursement

08 / 13 / 2004

Amount of Each Disbursement this Period

210.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MELISSA BROWN

Mailing Address PO BOX 488

City State Zip Code
FLOURTOWN PA 19031

Purpose of Disbursement
Donation

Candidate Name

Office Sought: x House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: PA District 13

Category/
Type

Transaction ID: SB21.15800

Date of Disbursement

08 / 23 / 2004

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Greater Carlisle Chamber of Commerce

Mailing Address 212 N. Hanover Street

City State Zip Code
Carlisle PA 17013

Purpose of Disbursement
Donation

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB21.15801

Date of Disbursement

07 / 23 / 2004

Amount of Each Disbursement this Period

278.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1488.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)
A. HRCC 2004, Inc.

Mailing Address PO Box 11787

City Harrisburg State PA Zip Code 17108

Purpose of Disbursement
Donation

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB21.15894
Date of Disbursement

09 / 22 / 2004

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. Jim Gerlach For Congress Committee

Mailing Address 811 Welsh Ayres Way

City Downingtown State PA Zip Code 19335

Purpose of Disbursement
Donation

Candidate Name

Office Sought: x House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: PA District D6

Category/
Type

Transaction ID: SB21.15902
Date of Disbursement

07 / 29 / 2004

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Transfer of Excess Campaign Funds

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB21.15911
Date of Disbursement

09 / 29 / 2004

Amount of Each Disbursement this Period

65000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

66500.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
 PEOPLE FOR PLATTS COMMITTEE

Full Name (Last, First, Middle Initial)
 A. Republican Club of York County

Mailing Address 37 W. Market Street

City York State PA Zip Code 17401

Purpose of Disbursement
 Donation

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB21.15863
 Date of Disbursement

08 / 20 / 2004

Amount of Each Disbursement this Period

50.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
 B. REPUBLICAN FEDERAL COMMITTEE OF PENNSYLVANIA

Mailing Address 112 STATE STREET
 112 STATE STREET

City HARRISBURG State PA Zip Code 17101

Purpose of Disbursement
 Donation

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB21.15908
 Date of Disbursement

08 / 19 / 2004

Amount of Each Disbursement this Period

10000.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
 C. York County Republican Committee

Mailing Address 37 W. Market Street

City York State PA Zip Code 17401

Purpose of Disbursement
 Donation

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB21.15891
 Date of Disbursement

08 / 22 / 2004

Amount of Each Disbursement this Period

200.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 10250.00

TOTAL This Period (last page this line number only) ▶ 81675.00