

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

**Contributions From Individuals (Itemized)**

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NAME OF COMMITTEE (in Full) Casey for Congress Committee			
Full Name, Mailing Address and ZIP Code <b>Mr Richard M Walsh</b> 1739 N. Washington Ave. Scranton, PA 18509-0000	Name of Employer <b>Richard M. Walsh Associates</b>	Date (month, day, year) <b>08/16/2000</b>	Amount of Each Receipt this Period <b>\$500.00</b>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>President</b>	Aggregate Year-to-Date <b>\$ 1,000.00</b>	
Full Name, Mailing Address and ZIP Code <b>Atty William W. Warren</b> 2311 Briarcliff Road Harrisburg, PA 17104-0000	Name of Employer <b>Saul Ewing Remick &amp; Saul</b>	Date (month, day, year) <b>09/11/2000</b>	Amount of Each Receipt this Period <b>\$250.00</b>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date <b>\$ 600.00</b>	
Full Name, Mailing Address and ZIP Code <b>Atty William W. Warren</b> 2311 Briarcliff Road Harrisburg, PA 17104-0000	Name of Employer <b>Saul Ewing Remick &amp; Saul</b>	Date (month, day, year) <b>09/25/2000</b>	Amount of Each Receipt this Period <b>\$250.00</b>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date <b>\$ 600.00</b>	
Full Name, Mailing Address and ZIP Code <b>Atty Peter D. Winchbrake</b> 123 W. Springfield Avenue Philadelphia, PA 19118-4020	Name of Employer <b>Philadelphia Law Dept.</b>	Date (month, day, year) <b>09/25/2000</b>	Amount of Each Receipt this Period <b>\$500.00</b>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date <b>\$ 500.00</b>	
Full Name, Mailing Address and ZIP Code <b>Mr. Daniel B. Wofford</b> 158 Three Ponds Lane Malvern, PA 19355	Name of Employer <b>Philadelphia Education Fund</b>	Date (month, day, year) <b>09/21/2000</b>	Amount of Each Receipt this Period <b>\$250.00</b>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Non-Profit Administrator/Attorney</b>	Aggregate Year-to-Date <b>\$ 500.00</b>	
Full Name, Mailing Address and ZIP Code <b>Thomas Wolf</b> 25 Front St Mount Wolf, PA 17347-0000	Name of Employer <b>The Wolf Organization Inc</b>	Date (month, day, year) <b>09/26/2000</b>	Amount of Each Receipt this Period <b>\$1,000.00</b>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>President</b>	Aggregate Year-to-Date <b>\$ 1,000.00</b>	
Full Name, Mailing Address and ZIP Code <b>Ms Susan E. Worth</b> P. O. Box 353 Buck Hills Falls, PA 18323-0353	Name of Employer <b>N/A</b>	Date (month, day, year) <b>09/30/2000</b>	Amount of Each Receipt this Period <b>\$1,000.00</b>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Homemaker</b>	Aggregate Year-to-Date <b>\$ 1,000.00</b>	
<b>SUBTOTAL of Receipts This Page (optional) .....</b>			<b>\$ 3,750.00</b>
<b>TOTAL This Period (last page this line number only) .....</b>			