

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

OCT 19 1 21 PM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) PHILADELPHIA VICTORY FUND.		2. FEC IDENTIFICATION NUMBER C00322594
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported c/o DCCC 430 SOUTH CAPITOL STREET, SE 2ND FLOOR		
CITY, STATE and ZIP CODE WASHINGTON, DC 20003		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

(a) 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)
 Termination Report

Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____


Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A	COLUMN B
5. Covering Period		This Period	Calendar Year-to-Date
08/20/96 INCEPTION through 09/30/96			
6. (a)	Cash on Hand January 1, 19 96		\$ 0
(b)	Cash on Hand at Beginning of Reporting Period	\$ 0	
(c)	Total Receipts (from Line 19)	\$ 139,050.00	\$ 139,050.00
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 139,050.00	\$ 139,050.00
7.	Total Disbursements (from Line 30)	\$ 136,025.10	\$ 136,025.10
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 3,024.90	\$ 3,024.90
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 809 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-218-3420
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 2,325.00	

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
PAUL JOHNSON

Signature of Treasurer  Date
10/09/96

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §497g.

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE PHILADELPHIA VICTORY FUND		REPORT COVERING PERIOD FROM 08/20/96 TO 09/30/96	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		127,050.00	127,050.00
ii. Unitemized		0	0
iii. Total (add i and ii) >		127,050.00	127,050.00
b. Political Party Committees		0	0
c. Other Political Committees (such as PACs)		12,000.00	12,000.00
d. Total Contributions (add a ii, b and c) >		139,050.00	139,050.00
12. Transfers From Affiliated/Other Party Committees		0	0
13. All Loans Received		0	0
14. Loan Repayments Received		0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		0	0
17. Other Federal Receipts (Dividends, Interest, etc.)		0	0
18. Transfers from Nonfederal Account for Joint Activity		0	0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		139,050.00	139,050.00
20. Total Federal Receipts (subtract line 18 from line 19) >		139,050.00	139,050.00
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share		0	0
ii. Non-Federal Share		0	0
b. Other Federal Operating Expenditures		25.10	25.10
c. Total Operating Expenditures (add a i, a ii, and b) >		25.10	25.10
22. Transfers to Affiliated/Other Party Committees		136,000.00	136,000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees		0	0
24. Independent Expenditures (use Schedule E)		0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441e(f)) (use Schedule F)		0	0
26. Loan Repayments Made		0	0
27. Loans Made		0	0
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees		0	0
b. Political Party Committees		0	0
c. Other Political Committees (such as PACs)		0	0
d. Total Contribution Refunds (add a, b and c) >		0	0
29. Other Disbursements		0	0
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		136,025.10	136,025.10
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		136,025.10	136,025.10
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		139,050.00	139,050.00
33. Total Contribution Refunds (from line 28d)		0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)		139,050.00	139,050.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		25.10	25.10
36. Offsets to Operating Expenditures (from line 15)		0	0
37. Net Operating Expenditures (subtract line 36 from 35) >		25.10	25.10

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full) PHILADELPHIA VICTORY FUND	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Museum Catering Company 33rd and Spruce Streets Philadelphia, PA 19104	0	2,325.00	0	2,325.00
Nature of Debt (Purpose): Catering				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				2,325.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				2,325.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 12
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

PHILADELPHIA VICTORY FUND

<p>A. Full Name, Mailing Address and ZIP Code William J. Avery 9033 Ashton Road Philadelphia, PA 19103</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Crown Cork & Seal</p> <p>Occupation Chairman</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 09/11/96</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Halmon L. Banks, III 1700 Market Street Philadelphia, PA 19103</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Martin, Banks, Pond & Lehocky</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 09/17/96</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Lynne A. Barrack 2001 Market Street Philadelphia, PA 19103</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Barrack, Rodos & Racine</p> <p>Occupation Paralegal</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year) 09/11/96</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Lawrence Jay Beaser 42 Overhill Road Bala Cynwyd, PA 19004</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Blank, Rome, Comisky & McCauley</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 09/11/96</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code David Berger 1622 Locust Street Philadelphia, PA 19103</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Berger & Montague</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 10,000.00</p>	<p>Date (month, day, year) 09/11/96</p>	<p>Amount of Each Receipt this Period 10,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code James J. Bloom 8616 Thomas Mill Terrace Philadelphia, PA 19128</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Requested</p> <p>Occupation Requested</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 09/11/96</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Mary F.W. Bond 201 West Evergreen Avenue Philadelphia, PA 19118</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 100.00</p>	<p>Date (month, day, year) 09/11/96</p>	<p>Amount of Each Receipt this Period 100.00</p>

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

PHILADELPHIA VICTORY FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Albert R. Boscov 70 Devon Drive Reading, PA 19606	Boscov's Department Stores	09/27/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Julian B. Brereton 7701 Lindbergh Boulevard Philadelphia, PA 19153	Requested	09/11/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Emerson T. Briddell 80 Mendenhall Drive Glen Mills, PA 19342	Phoenix Management Services, Inc.	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Michael A. Bright	Requested	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Iris C. Clark 440 Rex Avenue Philadelphia, PA 19118	Requested	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lawrence I. Cohen P.O. Box 53789 Philadelphia, PA 19105	Requested	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stewart L. Cohen 620 Montgomery School Lane Wynnewood, PA 19096	Requested	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date \$ 1,000.00	

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PAGE 3 OF 12

FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

PHILADELPHIA VICTORY FUND

A. Full Name, Mailing Address and ZIP Code James E. Collarano 1525 Locust Street Philadelphia, PA 19102 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 09/17/96 500.00	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Edward M. D'Alba 300 North Third Street Philadelphia, PA 19106 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Urban Engineers, Inc. Occupation President Aggregate Year-to-Date > \$	Date (month, day, year) 09/11/96 1,000.00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Morris J. Dean 1200 Four Penn Center Philadelphia, PA 19103 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Blank, Rome, Comisky & McCauley Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 09/11/96 500.00	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code Gary F. Di Vito 234 North Columbus Boulevard Philadelphia, PA 19106 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Law Offices of Gary Di Vito Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 09/11/96 1,000.00	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Joseph T. Egan 247 Sycamore Circle Langhorne, PA 19053 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer United Products Occupation President Aggregate Year-to-Date > \$	Date (month, day, year) 09/11/96 1,000.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Paul N. Fera 1019 Proter Street Philadelphia, PA 19148 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Requested Occupation Requested Aggregate Year-to-Date > \$	Date (month, day, year) 09/11/96 1,000.00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code S. David Fineman 1608 Walnut Street Philadelphia, PA 19103 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Fineman & Bach Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 09/11/96 500.00	Amount of Each Receipt this Period 500.00

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NAME OF COMMITTEE (in full)
PHILADELPHIA VICTORY FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer Requested	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence D. Finney 1563 Beechnut Circle Maple Glen, PA	Requested	09/27/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$	1,000.00
J. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joanna H. Flum P.O. Box 984 Bryn Mawr, PA 19010	Shrager, McDaid, Loftus, Loftus, Flum & Spivey	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	1,000.00
K. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Matthew I. Garfield 810 East Cayuga Street Philadelphia, PA 19124	Garfield Refining	09/27/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$	1,000.00
L. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barry Genkin 544 Howe Road Marion Station, PA 19066	Blank, Rome, Comisky & McCauley	09/11/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	500.00
M. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur J. Glatfelter R.R. 3, P.O. Box 395 Dallastown, PA 17313	Glatfelter Insurance Group	09/11/96	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$	5,000.00
N. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marguerite Goodman Greenfield 800 Times Building Ardmore, PA 19003	Greenfield & Rifkin	09/11/96	10,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	10,000.00
O. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard D. Greenfield 800 Times Building Ardmore, PA 19003	Greenfield & Rifkin	09/11/96	10,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	10,000.00

SUBTOTAL of Receipts This Page (optional)

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NAME OF COMMITTEE (in full) PHILADELPHIA VICTORY FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer Requested	Date (month, day, year)	Amount of Each Receipt this Period
David Gross One Neshaminy Interplex Trevose, PA 19053	Requested	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$ 1,000.00	
Peggy A. Grove 709 South Front Street Harrisburg, PA 17104	Rosewein Realty.	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1,000.00	
David W. Haas 1017 Westview Philadelphia, PA 19119	Requested	09/27/96	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$ 250.00	
Pierce J. Keating 326 West Lancaster Avenue Ardmore, PA 19003	Requested	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$ 1,000.00	
Peter F. Kelsen 302 Calvert Road Merion, PA 19066	Blank, Rome, Comisky & McCauley	09/11/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 500.00	
James J. Kennedy 227 Colonial Park Drive Springfield, PA 19064	Kennedy Printing -Company	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1,000.00	
Alexander Kerr 505 West Chestnut Hill Avenue Philadelphia, PA 19118	Hoyle, Morris & Kerr	09/27/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional) _____

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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 12
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

PHILADELPHIA VICTORY FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer Requested	Date (month, day, year)	Amount of Each Receipt this Period
Thomas J. Knox 520 South Sydbury Lane Wynnewood, PA 19096	Requested	09/11/96	3,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$	3,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Saul H. Krenzel River Park House Philadelphia, PA 19131	Saul Krenzel & Associates	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Maureen E. Krueger 1342 Lindsay Lane Jenkintown, PA 19046	Requested	09/11/96	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dale Levy 2038 Pine Street Philadelphia, PA 19103	Blank, Rome, Comlaky & McCauley	09/11/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mitchell G. Leibovitz 3111 West Allegheny Avenue Philadelphia, PA 19132	Pep Boys	09/11/96	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman	Aggregate Year-to-Date > \$	2,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael J. Marino 4019 Redwing Lane Audobon, PA 19403	Requested	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$	1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph P. McAtee 65 Tangle Wood Drive Langhorne, PA 19047	Urban Engineers, Inc.	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive VP	Aggregate Year-to-Date > \$	1,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full) PHILADELPHIA VICTORY FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert A. Newman 115 South 21st Street Philadelphia, PA 19103	Wapner, Newman	09/17/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John J. Petro 3414 West Coulter Street Philadelphia, PA 19129	Requested	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Walter M. Phillips, Jr. 452 West Chestnut Hill Avenue Philadelphia, PA 19118	Phillips & Phelan	09/11/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Samuel H. Pond 4 Stanfield Lane Bromall, PA 19008	Martin, Banks, Pond & Lehocky	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hyman H. Rabinovitch 3545 School House Lane Philadelphia, PA 19144	Requested	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Samuel N. Rabinowitz 1200 Four Penn Center Plaza Philadelphia, PA 19103	Self-employed	09/11/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur C. Raynes 317 Ingeborg Road Wynnewood, PA 19096	Raynes, McCarty, Binder, Ross & Mundy	09/11/96	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date \$ 2,500.00	

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)

PHILADELPHIA VICTORY FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul Rosenberg 600 North 4th Street Philadelphia, PA 19123	National Telecoin Corporation	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Andrew M. Rouse 1811 Chestnut Street Philadelphia, PA 19103	Requested	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Walter P. Rubel 2207 Rhonda Drive Bromall, PA 19008	Requested	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert L. Sachs, Jr. 510 East Gorgas Lane Philadelphia, PA 19119	Shrager, McDavid, Loftus, Flum & Spivey	09/11/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William R. Sautter 1274 Fritz Circle Huntingdon Valley, PA 19006	Requested	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert J. Schena 424 General Washington Road Wayne, PA 19087	Requested	09/11/96	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$ 5,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard S. Schiffrin 1416 Hillside Road Wynewood, PA 19096	Schiffrin & Craig	09/11/96	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 5,000.00	

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
 PHILADELPHIA VICTORY FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Theodore A. Schwartz 1620 Locust Street Philadelphia, PA 19103	M. Mark Mendel LTD	09/11/96	2200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 200.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Atef M. Shaaban 794 Holly Road Wayne, PA 19087	Urban Engineers, Inc.	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive VP Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Steiman 136 Springflower Court Huntingdon Valley, PA 19006	Self-employed	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alexander E. Stein 603 Fairview Road Penn Valley, PA 19072	Blank, Rome, Comisky & McCauley	09/11/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William E. Taylor, III 120 Edgewood Road Ardmore, PA 19003	Blank, Rome, Comisky & McCauley	09/11/96	750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 750.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wayne S. Thomas 8000 State Road Philadelphia, PA 19136	C.W. Thomas	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President Aggregate Year-to-Date > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William A.K. Titelman 1808 Fox Hunt Lane Harrisburg, PA 17110	Klett, Lieber, Rooney	09/11/96	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 2,500.00		

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full) PHILADELPHIA VICTORY FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Judy G. Ulan 1018 Cedar Grove Road Wynnewood, PA 19096	Law Offices of Judy Greenwood	09/11/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
	Aggregate Year-to-Date > \$	500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Herbert Vederman 426 Pine Street Philadelphia, PA 19106	Requested	09/11/96	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested		
	Aggregate Year-to-Date > \$	2,500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Diane N. Weiss 201 West Rittenhouse Square Philadelphia, PA 19103	Requested	09/11/96	10,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested		
	Aggregate Year-to-Date > \$	10,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joseph H. Weiss 1822 Spruce Street Philadelphia, PA 19103	Requested	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested		
	Aggregate Year-to-Date > \$	1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
F. John White 1600 Two Logan Square Philadelphia, PA 19103	Requested	09/11/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested		
	Aggregate Year-to-Date > \$	500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Larry Wiseman 686 Meadowbrook Lane Media, PA 19063	Requested	09/11/96	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested		
	Aggregate Year-to-Date > \$	250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stanley Wolfe 7303 Emlen Street Philadelphia, PA 19119	Requested	09/11/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested		
	Aggregate Year-to-Date > \$	1,000.00	

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full) PHILADELPHIA VICTORY FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer Requested	Date (month, day, year)	Amount of Each Receipt this Period
Joseph M. Yohlin 817 Redgate Road Dresher, PA 19025	Requested	09/11/96	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested		
		Aggregate Year-to-Date > \$	250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

PHILADELPHIA VICTORY FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Brill & Truelove 159 North State Street Newtown, PA 18940	Partnership Breakdown Attached	09/17/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Levin, Fishbein, Sedran & Berman 320 Walnut Street Philadelphia, PA 19106	Partnership Breakdown Attached	09/17/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Manchel, Lundy & Lessin 1600 Market Street Philadelphia, PA 19103	Partnership Breakdown Attached	09/17/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Martin, Banks, Pond & Lehocky 1700 Market Street Philadelphia, PA 19103	Partnership Breakdown Attached	09/17/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Montgomery, McCracken, Walker & Rhoads 123 South Broad Street Philadelphia, PA 19109	Partnership Breakdown Attached	09/17/96	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	2,500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Obermayer, Rebmann, Maxwell & Hippel One Penn Center Philadelphia, PA 10103	Partnership Breakdown Attached	09/17/96	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	2,500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

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127,050.00

PHILADELPHIA VICTORY FUND
PARTNERSHIP BREAKDOWN FOR BRILL & TRUELOVE
MEMO ENTRY

NAME/ ADDRESS	OCCUPATION/ EMPLOYER	DATE	RECEIPT THIS PERIOD	YEAR TO DATE
CHRISTOPHER BRILL 159 NORTH STATE STREET NEWTOWN, PA 18940	ATTORNEY BRILL & TRUELOVE	09/17/96	500.00	500.00

PHILADELPHIA VICTORY FUND
 PARTNERSHIP BREAKDOWN FOR LEVIN, FISHBEEIN, SEDRAN & BERMAN
 MEMO ENTRY

NAME/ ADDRESS	OCCUPATION/ EMPLOYER	DATE	RECEIPT THIS PERIOD	YEAR TO DATE
LAWRENCE BERMAN 320 WALNUT STREET PHILADELPHIA, PA 19106	ATTORNEY LEVIN, FISHBEEIN, SEDRAN & BERMAN	09/17/96	250.00	250.00
MICHAEL FISHBEEIN 320 WALNUT STREET PHILADELPHIA, PA 19106	ATTORNEY LEVIN, FISHBEEIN, SEDRAN & BERMAN	09/17/96	250.00	250.00
ARNOLD LEVIN 320 WALNUT STREET PHILADELPHIA, PA 19106	ATTORNEY LEVIN, FISHBEEIN, SEDRAN & BERMAN	09/17/96	250.00	250.00
HOWARD SEDRAN 320 WALNUT STREET PHILADELPHIA, PA 19106	ATTORNEY LEVIN, FISHBEEIN, SEDRAN & BERMAN	09/17/96	250.00	250.00

PHILADELPHIA VICTORY FUND
 PARTNERSHIP BREAKDOWN FOR MANCHEL, LUNDY & LESSIN
 MEMO ENTRY

NAME/ ADDRESS	OCCUPATION/ EMPLOYER	DATE	RECEIPT THIS PERIOD	YEAR TO DATE
MARVIN LUNDY 1600 MARKET STREET PHILADELPHIA, PA 19103	ATTORNEY MANCHEL, LUNDY & LUNDY	09/17/96	1000.00	1000.00

PHILADELPHIA VICTORY FUND
PARTNERSHIP BREAKDOWN FOR MARTIN, BANKS, POND & LEHOCKY
MEMO ENTRY

NAME/ ADDRESS	OCCUPATION/ EMPLOYER	DATE	RECEIPT THIS PERIOD	YEAR TO DATE
GEORGE MARTIN 1700 MARKET STREET PHILADELPHIA, PA 19103	ATTORNEY MARTIN, BANKS, POND & LEHOCKY	09/17/96	1000.00	1000.00

PHILADELPHIA VICTORY FUND
PARTNERSHIP BREAKDOWN FOR MONTGOMERY, MCCrackEN, WALKER & RHOADS
MEMO ENTRY

NAME/ ADDRESS	OCCUPATION/ EMPLOYER	DATE	RECEIPT THIS PERIOD	YEAR TO DATE
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KEN JARON
123 SOUTH BROAD STREET
PHILADELPHIA, PA 19109

ATTORNEY
MONTGOMERY, MCCrackEN,
WALKER & RHOADS

09/17/96

2500.00

2500.00

PHILADELPHIA VICTORY FUND
PARTNERSHIP BREAKDOWN FOR OBERMAYER, REBMANN, MAXWELL & HIPPEL
MEMO ENTRY

NAME/ ADDRESS	OCCUPATION/ EMPLOYER	DATE	RECEIPT THIS PERIOD	YEAR TO DATE
TOM LEONARD ONE PENN CENTER PHILADELPHIA, PA 19103	ATTORNEY OBERMAYER, REBMANN, MAXWELL & HIPPEL	09/17/96	2500.00	2500.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

PHILADELPHIA VICTORY FUND

A. Full Name, Mailing Address and ZIP Code Mesirov, Gelman, Jaffe, Cramer & Jamieson Federal Fund 1500 The Fidelity Building Philadelphia, PA 19109 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 09/17/96	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code NOVACARE PAC 1016 West Ninth Avenue King of Prussia, PA 19406 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 09/17/96	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code RITE AID PAC P.O. Box 3165 Harrisburg, PA 17105 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 10,000.00	Date (month, day, year) 09/17/96	Amount of Each Receipt this Period 10,000.00
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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)

TOTAL This Period (last page this line number only)

12,000.00

ALLOCATION RATIOS

NAME OF COMMITTEE

PHILADELPHIA VICTORY FUND

ALLOCATION RATIOS FOR INDIVIDUAL FUNDRAISING EVENTS, EXEMPT ACTIVITIES, AND SHARED DIRECT CANDIDATE SUPPORT APPEARING ON THIS REPORT.

Methods of allocation:

I. **FUNDRAISING** activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.

II. **EXEMPT** activities are allocated using the "time and space method" where the federal proportion of disbursements is based on the proportion of time or space devoted to federal candidates.

III. **Shared DIRECT CANDIDATE** support activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

<p>NAME OF ACTIVITY OR EVENT PVF</p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL % 65%</p>	<p>NON-FEDERAL % 35%</p>
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL %</p>	<p>NON-FEDERAL %</p>
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL %</p>	<p>NON-FEDERAL %</p>
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL %</p>	<p>NON-FEDERAL %</p>
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL %</p>	<p>NON-FEDERAL %</p>
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL %</p>	<p>NON-FEDERAL %</p>
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL %</p>	<p>NON-FEDERAL %</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21b

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) PHILADELPHIA VICTORY FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Crestar Bank 3301 New Mexico Avenue, NW Washington, DC 20016	Bank charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/18/96	25.10
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

25.10

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full) PHILADELPHIA VICTORY FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003	Transfer of joint fundraising proceeds Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/30/96	47,200.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democratic Senatorial Campaign Committee 430 South Capitol Street Washington, DC 20003	Transfer of joint fundraising proceeds Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/30/96	88,800.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

136,000.00

SCHEDULE I
(effective 1/1/91)

AGGREGATION PAGE
NON-FEDERAL ACCOUNTS OF NATIONAL PARTY
COMMITTEES

(Use a separate Aggregation Page for each nonfederal account)

NAME OF FEDERAL COMMITTEE		PHILADELPHIA VICTORY FUND	
NAME OF ACCOUNT	NON - FEDERAL #1	COVERAGE PERIOD FROM 08/20/96 INCEPTION	TO 09/30/96
		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
RECEIPTS (ATTACH SUPPORTING MEMO SCHEDULE A ITEMIZING RECEIPTS AGGREGATING IN EXCESS OF \$200 DURING THE CALENDAR YEAR)			
1. TOTAL RECEIPTS:		80,000.00	80,000.00
DISBURSEMENTS: (ATTACH SUPPORTING MEMO SCHEDULE B ITEMIZING DISBURSEMENTS AGGREGATING IN EXCESS OF \$200 DURING THE CALENDAR YEAR)			
2. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT FOR ALLOCABLE EXPENSES		0	0
3. TRANSFERS TO STATELOCAL PARTY ORGANIZATIONS		0	0
4. DIRECT STATELOCAL CANDIDATE SUPPORT		0	0
5. OTHER DISBURSEMENTS		35,725.10	35,725.10
6. TOTAL DISBURSEMENTS (ADD 2, 3, 4, AND 5)		35,725.10	35,725.10
SUMMARY			
7. BEGINNING CASH ON HAND (FOR COLUMN B USE CASH AS OF JANUARY 1ST)		0	0
8. RECEIPTS (FROM LINE 1)		80,000.00	80,000.00
9. SUBTOTAL		80,000.00	80,000.00
10. DISBURSEMENTS (FROM LINE 6)		35,725.10	35,725.10
11. ENDING CASH ON HAND		44,274.90	44,274.90

PHILADELPHIA VICTORY FUND
 NON - FEDERAL #1
 MEMO ENTRY - SCHEDULE I - LINE 1

NAME/ ADDRESS	DATE	RECEIPT THIS PERIOD	YEAR TO DATE
ANAPOL, SCHWARTZ, WEISS & COHAN, PC 1900 DELANCEY PLACE PHILADELPHIA, PA 19103	09/11/96	5000.00	5000.00
ARTEMIS CAPITAL GROUP, INC. 65 EAST 55TH STREET NEW YORK, NY 10022	09/27/96	2000.00	2000.00
COMCAST CORPORATION 1500 MARKET STREET PHILADELPHIA, PA 19102	09/11/96	1000.00	1000.00
CROWN CORK & SEAL COMPANY, INC. 9300 ASHTON ROAD PHILADELPHIA, PA 19136	09/11/96	1000.00	1000.00
JOHN S. DIGIORGIO 2126 SOUTH 20TH STREET PHILADELPHIA, PA 19145	09/17/96	1000.00	1000.00
GRAHAM COMPANY ONE PENN SQUARE WEST PHILADELPHIA, PA 19102	09/11/96	2500.00	2500.00
KENNEDY PRINTING COMPANY, INC. 5534 BALTIMORE AVENUE PHILADELPHIA, PA 19143	09/11/96	3000.00	3000.00

PHILADELPHIA VICTORY FUND
 NON - FEDERAL #1
 MEMO ENTRY - SCHEDULE I - LINE 1

NAME/ ADDRESS	DATE	RECEIPT THIS PERIOD	YEAR TO DATE
KEYSTONE OUTDOOR SIGN COMPANY, INC. P.O. BOX 202 CHELTENHAM, PA 19012	09/11/96	1000.00	1000.00
KLETT, LEIBER, ROONEY & SCHORLING PAC 240 NORTH THIRD STREET HARRISBURG, PA 17101	09/27/96	2500.00	2500.00
KENNETH L. KLOTEN 525 WALNUT LANE SWARTHMORE, PA 19081	09/11/96	5000.00	5000.00
KOLSBY GORDON, ROBIN, SHORB & ROTHWEILER 1650 MARKET STREET PHILADELPHIA, PA 19103	09/17/96	2500.00	2500.00
LOT CONTRACTORS, INC. 38 FRISLAND DRIVE CHURCHVILLE, PA 18966	09/11/96	1000.00	1000.00
NEIGHBORHOOD RESTORATIONS LP P.O. BOX 605 DRESHER, PA 19025	09/27/96	1000.00	1000.00
NINTH DECADE FUND 15TH AND CHESTNUT STREETS PHILADELPHIA, PA 19102	09/11/96	5000.00	5000.00

PHILADELPHIA VICTORY FUND
 NON - FEDERAL #1
 MEMO ENTRY - SCHEDULE I - LINE 1

NAME/ ADDRESS	DATE	RECEIPT THIS PERIOD	YEAR TO DATE
PENN WAREHOUSING AND DISTRIBUTION, INC. 2147 SOUTH COLUMBUS BOULEVARD PHILADELPHIA, PA 19148	09/11/96	2000.00	2000.00
PHILLIES P.O. BOX 7575 PHILADELPHIA, PA 19101	09/27/96	2000.00	2000.00
PUBLIC FINANCIAL MANAGEMENT, INC. TWO LOGAN SQUARE PHILADELPHIA, PA 19103	09/11/96	2500.00	2500.00
RAYNES, MCCARTY, BINDER, ROSS & MUNDY 1845 WALNUT STREET PHILADELPHIA, PA 19103	09/17/96	2500.00	2500.00
REMP PAC 4 PENN CENTER PLAZA PHILADELPHIA, PA 19103	09/27/96	2500.00	2500.00
RENDELL '95 P.O. BOX 58635 PHILADELPHIA, PA 19102	09/11/96	7500.00	7500.00

PHILADELPHIA VICTORY FUND
 NON - FEDERAL #1
 MEMO ENTRY - SCHEDULE I - LINE 1

NAME/ ADDRESS	DATE	RECEIPT THIS PERIOD	YEAR TO DATE
RITE AID HEADQUARTERS CORPORATION P.O. BOX 3165 HARRISBURG, PA 17105	09/11/96	10000.00	10000.00
ROSENSTEIN & ROMANO, PC 2 WEST LAFAYETTE STREET NORRISTOWN, PA 19401	09/11/96	1000.00	1000.00
ROY F. WESTON, INC. 1 WESTON WAY WEST CHESTER, PA 19380	09/11/96	1000.00	1000.00
S.J. WOJDAK AND ASSOCIATES, INC. 200 SOUTH BROAD STREET PHILADELPHIA, PA 19102	09/11/96	5000.00	5000.00
SAGOT, JENNINGS & SIGMOND 510 WALNUT STREET PHILADELPHIA, PA 29106	09/27/96	2000.00	2000.00
SHELLER, LUDWIG & BADEY, PC 1528 WALNUT STREET PHILADELPHIA, PA 19102	09/11/96	1000.00	1000.00
SHIP PARTNERS 417 NORTH DELAWARE AVENUE PHILADELPHIA, PA 19123	09/11/96	1000.00	1000.00

PHILADELPHIA VICTORY FUND
 NON - FEDERAL #1
 MEMO ENTRY - SCHEDULE I - LINE 1

NAME/ ADDRESS	DATE	RECEIPT THIS PERIOD	YEAR TO DATE
SMITH INSURANCE ASSOCIATES, INC. 1120 BETHLEHEM PIKE SPRING HOUSE, PA 19477	09/11/96	1000.00	1000.00
STEPHEN C. JOSEL & ASSOCIATES, PC 2019 WALNUT STREET PHILADELPHIA, PA 19103	09/11/96	500.00	500.00
TRANS FREIGHT SYSTEMS, INC. 8415 ENVOY AVENUE PHILADELPHIA, PA 19153	09/11/96	2000.00	2000.00
U.S. AIR 2345 CRYSTAL DRIVE ARLINGTON, VA 22227	09/11/96	2000.00	2000.00
WEINSTEIN, GOSS, SCHLEIFER & EISENBERG, PC 1634 SPRUCE STREET PHILADELPHIA, PA 19103	09/11/96	1000.00	1000.00
TOTAL		80000.00	

PHILADELPHIA VICTORY FUND
NON - FEDERAL #1
MEMO ENTRY - SCHEDULE I - LINE 5

NAME/ADDRESS	PURPOSE	DATE	AMOUNT
CRESTAR BANK 3301 NEW MEXICO AVENUE, NW WASHINGTON, DC 20016	CHECK PRINTING	09/18/96	25.10
DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE 430 SOUTH CAPITOL STREET WASHINGTON, DC 20003	TRANSFER	09/30/96	35,700.00

TOTAL

35,725.10

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 10-15-96
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED and/or DATE OF RECEIPT
PREPARER <i>TEG</i>	DATE PREPARED 10-19-96