

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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

PAGE 18 OF 31
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)

Committee to Elect Ed O'Brien C00351716

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Matricia McLaughlin McLaughlin & Glazer 800 Walnut Street Easton, PA 18042 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Employed Occupation Attorney Aggregate Year-to-Date > \$	8/15/00 \$355.00	\$50.00
B. Full Name, Mailing Address and ZIP Code M. Mark Mendel 1820 Locust St. Philadelphia, PA 19103 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation Attorney Aggregate Year-to-Date > \$	9/18/00 \$350.00	\$250.00
C. Full Name, Mailing Address and ZIP Code M. Mark Mendel 1820 Locust St. Philadelphia, PA 19103 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation Attorney Aggregate Year-to-Date > \$	9/18/00 \$350.00	\$100.00
D. Full Name, Mailing Address and ZIP Code Joanne S. Messenlehner 40 Schoeneck Avenue Nazareth, PA 18064-1216 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Commonwealth of PA Occupation Auditor Aggregate Year-to-Date > \$	7/8/00 \$211.00	\$25.00
E. Full Name, Mailing Address and ZIP Code Joanne S. Messenlehner 40 Schoeneck Avenue Nazareth, PA 18064-1216 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Commonwealth of PA Occupation Auditor Aggregate Year-to-Date > \$	8/13/00 \$211.00	\$40.00
F. Full Name, Mailing Address and ZIP Code Joan D. Mickley-Smith 1243 Turner St. Allentown, PA 18102 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Occupation Retired Aggregate Year-to-Date > \$	9/14/00 \$300.00	\$200.00
G. Full Name, Mailing Address and ZIP Code Rudolph L. Milasich, Jr. 5819 Ferree St. Pittsburgh, PA 15217 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	USWA Occupation Attorney Aggregate Year-to-Date > \$	9/18/00 \$350.00	\$100.00

SUBTOTAL of Receipts This Page (optional) \$785.00

TOTAL this Period (last page this line number only)