

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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

PAGE 21 OF 31
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Committee to Elect Ed O'Brien CDD351718

A. Full Name, Mailing Address and ZIP Code Charles J. Nemeth 724 Third Avenue Bethlehem, PA 18018 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired	Date (month, day, year) 7/3/00	Amount of Each Receipt this Period \$25.00
	Occupation Retired Aggregate Year-to-Date > \$ 5985.00		
B. Full Name, Mailing Address and ZIP Code Gregory A. Niverth R. D. 1, Box 71 734 Jefferson Road Waynesburg, PA 15370 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Allegheny Ludlum	Date (month, day, year) 8/21/00	Amount of Each Receipt this Period \$100.00
	Occupation Steelworker Aggregate Year-to-Date > \$ 341.00		
C. Full Name, Mailing Address and ZIP Code Gregory A. Niverth R. D. 1, Box 71 734 Jefferson Road Waynesburg, PA 15370 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Allegheny Ludlum	Date (month, day, year) 9/20/00	Amount of Each Receipt this Period \$36.00
	Occupation Steelworker Aggregate Year-to-Date > \$ 341.00		
D. Full Name, Mailing Address and ZIP Code Carlos Nolla P. O. Box 2818 Wichita, KS 67201-2818 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested	Date (month, day, year) 9/30/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Information Requested Aggregate Year-to-Date > \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code Mary Win O'Brien 6350 Caton St. Pittsburgh, PA 15217 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer USWA	Date (month, day, year) 8/30/00	Amount of Each Receipt this Period \$500.00
	Occupation Personnel Department Head Aggregate Year-to-Date > \$ 1,700.00		
F. Full Name, Mailing Address and ZIP Code Mary Win O'Brien 6350 Caton St. Pittsburgh, PA 15217 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer USWA	Date (month, day, year) 7/12/00	Amount of Each Receipt this Period \$100.00
	Occupation Personnel Department Head Aggregate Year-to-Date > \$ 1,700.00		
G. Full Name, Mailing Address and ZIP Code Richard S. Oravec P. O. Box 4278 Bethlehem, PA 18018-0278 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested	Date (month, day, year) 9/18/00	Amount of Each Receipt this Period \$250.00
	Occupation Information Requested Aggregate Year-to-Date > \$ 250.00		

SUBTOTAL of Receipts This Page (optional)	\$2,011.00
TOTAL This Period (last page this line number only)	