

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) MURTHA FOR CONGRESS COMMITTEE	
ADDRESS (number and street) ☐ Check if different than previously reported. BT FINANCIAL PLAZA - SUITE 220 551 MAIN STREET	
CITY, STATE and ZIP CODE JOHNSTOWN, PA 15901	STATE/DISTRICT PA/12TH DISTRICT

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER
000019075

3. IS THIS REPORT AN AMENDMENT?

☐ YES ☒ NO

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report ☐ 12-Day Pre-Election Report for the _____ (Type of Election)
election on _____ in the State of _____
- ☐ July 15 Quarterly Report
- ☐ October 15 Quarterly Report ☒ 30-Day Post-Election Report for the GENERAL (Type of Election)
election on NOV. 3, 1998 in the State of PENNSYLVANIA
- ☐ January 31 Year End Report
- ☐ July 31 Mid-Year Report (Non-election Year Only) ☐ Termination Report

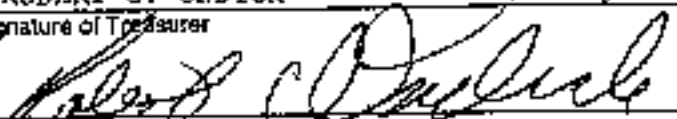
This report contains activity for ☐ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
OCT. 15, 1998 through NOV. 23, 1998		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	113,050.00	399,444.59
(b) Total Contribution Refunds (from Line 20(d))	-0-	-0-
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	113,050.00	399,444.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	145,373.15	374,880.39
(b) Total Offsets to Operating Expenditures (from Line 14)	334.44	449.69
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	145,038.71	374,430.70
8. Cash on Hand at Close of Reporting Period (from Line 27)	187,343.62	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	-0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	12,657.58	

For further information
contact:
Federal Election Commission
889 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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 ROBERT C. ONDICK	Date 11-25-98
Signature of Treasurer 	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full) MURTHA FOR CONGRESS COMMITTEE		Report Covering the Period: From: OCT. 15, 1998 To: NOV. 23, 1998	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A) -----		54,550.00	
(ii) Unitemized -----			
(iii) Total of contributions from Individuals -----		54,550.00	138,605.00
(b) Political Party Committees -----			189.59
(c) Other Political Committees (such as PACs) -----		58,500.00	260,650.00
(d) The Candidate -----			
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d)) -----		113,050.00	399,444.59
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----			
13. LOANS:			
(a) Made or Guaranteed by the Candidate -----			
(b) All Other Loans -----			
(c) TOTAL LOANS (add 13(a) and (b)) -----			
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----		334.44	449.69
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----		112.81	1,379.26
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----		113,497.25	401,273.54
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES -----		145,373.15	374,880.39
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES -----			
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate -----			
(b) Of All Other Loans -----			
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----			
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees -----			
(b) Political Party Committees -----			
(c) Other Political Committees (such as PACs) -----			
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----			
21. OTHER DISBURSEMENTS -----		11,900.04	44,869.56
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----		157,273.19	419,749.95

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$ 231,119.56	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$ 113,497.25	24
25. SUBTOTAL (add Line 23 and Line 24) -----	\$ 344,616.81	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$ 157,273.19	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$ 187,343.62	27

MURTHA FOR CONGRESS COMMITTEE
BT FINANCIAL PLAZA - SUITE 220
551 MAIN STREET
JOHNSTOWN, PA 15901

SUPPLEMENT

A "BEST EFFORT" HAS BEEN MADE TO OBTAIN MISSING INFORMATION.

A LETTER WAS SENT TO EACH CONTRIBUTOR REQUESTING THE MISSING INFORMATION.

AS OF THIS REPORT FILING WE HAVEN'T RECEIVED A REPLY FROM EACH CONTRIBUTOR
THAT IS INCOMPLETE.

Information received from such Reports and Statements may not be sold or used by any person for the purpose of collecting contributions or for commercial sales, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Murcha For Congress Committee

A. Full Name, Mailing Address and ZIP Code Robert Banasik 8187 Sanctuary Drive Columbus, OH 43235	Name of Employer Omnilife Health Care Sys 1207 N. High St. #300 Columbus, OH 43201	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 350
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Professor & President		
	Aggregate Year-to-Date > \$ 350		
B. Full Name, Mailing Address and ZIP Code John Banks 8461 Holly Leaf Drive McLean, VA 22102	Name of Employer R.J. Banks & Co. 117 Oranoco Street Alexandria, VA 22314	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Consultant		
	Aggregate Year-to-Date > \$ 1,000		
C. Full Name, Mailing Address and ZIP Code Michael Bove RD 10; Box 305 Greensburg, PA 15601	Name of Employer Self-Employed RD 10, Box 305 Greensburg, PA 15601	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 100
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Self-Employed		
	Aggregate Year-to-Date > \$ 100		
D. Full Name, Mailing Address and ZIP Code Linda Boxx 737 Weldon Street Latrobe, PA 15650	Name of Employer Katherine Mabis McKenna PO Box 136 Latrobe, PA 15650	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Chairman		
	Aggregate Year-to-Date > \$1,000		
E. Full Name, Mailing Address and ZIP Code William Caruthers 1825 Grandview Avenue Irwin, PA 15642	Name of Employer	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$ 350		
F. Full Name, Mailing Address and ZIP Code B. Patrick Costello 215 Hawksworth Road Greensburg, PA 15601	Name of Employer Costello, Marsh Ward 15 N. Main Street Greensburg, PA 15601	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Attorney		
	Aggregate Year-to-Date > \$1,150		
G. Full Name, Mailing Address and ZIP Code Edward Dunlap 2071 Hycroft Dr. Pittsburg, PA 15241	Name of Employer Centimark Corporation 12 Grandview Circle Canonsburg, PA 15317-8533	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation President-CEO		
	Aggregate Year-to-Date > \$500		

TOTAL of Receipts, This Page (optional) \$4,200

L This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules
for each category of the
Detailed Summary Page

Page 2 of 18
FOR LINE NUMBER
11a(1)

Any information coming 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)

Murtha For Congress Committee

A. Full Name, Mailing Address and ZIP Code Edward Eckenhoff 1658-35th Street, NW Washington, DC 20007	Name of Employer Nat'l Rehab Hospital 102 Irving Street, NW Washington, DC 20010	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$ 1,000	
B. Full Name, Mailing Address and ZIP Code George Fattman 1408 Coventry Court Johnstown, PA 15905-1900	Name of Employer 	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 50
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 50	
C. Full Name, Mailing Address and ZIP Code David Girard -diCarlo 7 Ithan Woods Lane Villanova, PA 19085-1337	Name of Employer Blank Rome Cominsky & McCann One Logan Square Philadelphia, PA 19103	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Managing Partner	Aggregate Year-to-Date > \$ 1,000	
D. Full Name, Mailing Address and ZIP Code John Hutchinson 318 Alexander Avenue Greensburg, PA 15601	Name of Employer Hutchinson & Gunter 715 Grove Avenue Greensburg, PA 15601	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 650	
E. Full Name, Mailing Address and ZIP Code Edward Klaymar 173 Mill Run Road Indiana, PA 15701	Name of Employer KNI Incorporated PO Box 58, Old Rt 119N Homer City, PA 15748	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation President & CEO	Aggregate Year-to-Date > \$ 600	
F. Full Name, Mailing Address and ZIP Code Andrew Kuzneski, Jr. 453 Brown Road Indiana, PA 15701	Name of Employer A.J. Kuzneski, Jr. Inc 19 N. Sixth Street Indiana, PA 15701	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 350	
G. Full Name, Mailing Address and ZIP Code Ronald LeJaune 620 Park Place Pittsburgh, PA 15237	Name of Employer Bankson Engineers Inc. PO Box 200-100 Blue Run Indianola, PA 15051	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 100
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Secretary-Treasurer	Aggregate Year-to-Date > \$ 250	

TOTAL of Receipts This Page (optional)

\$3,400

AL This Period (last page this line number only)

MODULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

Page 3 of 18
FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (in Full)

Murcha For Congress Committee

A. Full Name, Mailing Address and ZIP Code Joseph Mangarella 413 Baker Street Hastings, PA 16646 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Carol Ann Apparel Industrial Park Hastings, PA 16646 Occupation President Aggregate Year-to-Date > \$ 250	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 250
B. Full Name, Mailing Address and ZIP Code Robert Monsour, MD Box 348 Huntingdon Farm Ligonier, PA 15658 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Self-Employed 1500 Broad Street Greensburg, PA 15601 Occupation Medical Doctor Aggregate Year-to-Date > \$ 200	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 200
C. Full Name, Mailing Address and ZIP Code Gerald Moore Box 323 Elrama, PA 15038 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Nutrition Inc. 202 S. Third Street West Newton, PA 15089 Occupation Vice-President Aggregate Year-to-Date > \$1,000	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$1,000
D. Full Name, Mailing Address and ZIP Code Sylvia Pasquerilla Holiday Inn-Market Street Johnstown, PA 15901 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Housewife Aggregate Year-to-Date > \$1,000	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$1,000
E. Full Name, Mailing Address and ZIP Code Lawrence Pettit See Supplement Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer IUP John Sutton Hall Indiana, PA 15701 Occupation President Aggregate Year-to-Date > \$ 200	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 100
F. Full Name, Mailing Address and ZIP Code Anthony Petrosky Box 70 Slickville, PA 15684 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Retired Aggregate Year-to-Date > \$ 200	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 200
G. Full Name, Mailing Address and ZIP Code A. Joseph Phillips Box 145 Eneigh, PA 15738 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Aerofab, Inc. 722 Ridge Road Nicktown, PA 15762 Occupation President Aggregate Year-to-Date > \$ 600	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 500

TOTAL of Receipts This Page (optional)

\$3,250

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule D
for each category of the
Detailed Summary Page

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FOR LINE NUMBER
11a(f)

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NAME OF COMMITTEE (in Full)

Murtha For Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Howard Picking RR 5, Box 401 Johnstown, PA 15905-9639	Retired	10/28/98	\$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > \$ 1,150		
B. Full Name, Mailing Address and ZIP Code John Robertshaw 505 N. Maple Street Greensburg, PA 15601	Laurel Vending 15 Nashua Street Greensburg, PA 15601	10/28/98	\$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Owner Aggregate Year-to-Date > \$ 250		
C. Full Name, Mailing Address and ZIP Code Marc Robertshaw HC 64, Box 319 Rector, PA 15677-9703	Robertshaw Mgmt. 116 N. Main Street Greensburg, PA 15601	10/28/98	\$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: President Aggregate Year-to-Date > \$ 250		
D. Full Name, Mailing Address and ZIP Code William Shane 440 School Street Indiana, PA 15701	Natural Gas Supply Co. 440 School Street Indiana, PA 15701	10/28/98	\$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Consultant Aggregate Year-to-Date > \$ 600		
E. Full Name, Mailing Address and ZIP Code Elmer Snyder PO Box 1022 Kittanning, PA 16201	Snyder Assoc. Co. Inc. One Glade Park East Kittanning, PA 16201	10/28/98	\$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: President Aggregate Year-to-Date > \$ 750		
F. Full Name, Mailing Address and ZIP Code Louis Tate 625 Franklin Street Clymer, PA 15728	Luigi's Ristorante 31 R. 6th Street Clymer, PA 15728	10/28/98	\$ 100
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Owner Aggregate Year-to-Date > \$ 200		
G. Full Name, Mailing Address and ZIP Code William Titelman 1808 Fox Hunt Lane Harrisburg, PA 17110	Rite Aid Corporation Box 3165 Harrisburg, PA 17110	10/28/98	\$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Exec. VP Care & Gov't Affairs Aggregate Year-to-Date > \$ 1,500		
TOTAL of Receipts This Page (optional)			\$2,850
This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 5 OF 18
FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (in full)

Murtha For Congress Committee

A. Full Name, Mailing Address and ZIP Code Richard Toy 1142 Orr Avenue Kittanning, PA 16201		Name of Employer Occupation Retired	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 100
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Aggregate Year-to-Date > \$ 100		
B. Full Name, Mailing Address and ZIP Code VOID		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code VOID		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code VOID		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code VOID		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code VOID		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code VOID		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Aggregate Year-to-Date > \$		
TOTAL of Receipts This Page (optional)				\$100
L This Period (last page this line number only)				

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 18

FOR LINE NUMBER
11a(1)

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Geano Agostino 1000 Post Drive Latrobe, PA 15650	Name of Employer Geano's Dist. Inc. RR 1, Box 293 Bradenville, PA 15620 Occupation President	Date (month, day, year) 11/03/98	Amount of Each Receipt this Period \$ 100
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 150		
B. Full Name, Mailing Address and ZIP Code Erwin Beidler 28 Morningside Drive Greensburg, PA 15601	Name of Employer American Ins. of Ecology 28 Morningside Dr. Greensburg, PA 15601 Occupation VP-Administration	Date (month, day, year) 11/03/98	Amount of Each Receipt this Period \$ 50
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 50		
C. Full Name, Mailing Address and ZIP Code Gertrude Chadwick 462 Zipfel Road Hooversville, PA 15936-7411	Name of Employer Occupation Housewife	Date (month, day, year) 11/03/98	Amount of Each Receipt this Period \$ 150
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 150		
D. Full Name, Mailing Address and ZIP Code Richard Crawford 219 Bonnie Lane Holidaysburg, PA 16648	Name of Employer Saint Francis College 600 Franciscan Way Loretto, PA 15547 Occupation Ass't to President	Date (month, day, year) 11/03/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 600		
E. Full Name, Mailing Address and ZIP Code Constance Girard-diCarlo 7 Ithan Woods Lane Villanova, PA 19085-1337	Name of Employer Health Care Supp/Aramark 1101 Market Street Philadelphia, PA 19107 Occupation President	Date (month, day, year) 11/03/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
F. Full Name, Mailing Address and ZIP Code Mary Jo Helsel 170 Worth Street Johnstown, PA 15905	Name of Employer Occupation Retired	Date (month, day, year) 11/03/98	Amount of Each Receipt this Period \$ 50
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 50		
G. Full Name, Mailing Address and ZIP Code Leiss Tool & Die Proprietorship For:	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		

UBTOTAL of Receipts This Page (optional)

\$1,850

OTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 18
FOR LINE NUMBER 11a(1)

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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Peter Leiss RD 7, Gilmour Bypass Somerset, PA 15501		Name of Employer Leiss Tool & Die 301 N. Pleasant Ave. Somerset, PA 15501	Date (month, day, year) 11/03/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Owner	Aggregate Year-to-Date > \$ 600	
B. Full Name, Mailing Address and ZIP Code Bobette Winkel 10036 Chartwell Manor Ct. Potomac, MD 20854		Name of Employer	Date (month, day, year) 11/03/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Housewife	Aggregate Year-to-Date > \$ 2,000	
C. Full Name, Mailing Address and ZIP Code VOID		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code Jeffrey Frank 2587 Evergreen Dr. Indiana, PA 15701		Name of Employer Ligonier Valley School Dist. Ligonier, PA 15658	Date (month, day, year) 11/03/98	Amount of Each Receipt this Period \$ 100
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Teacher	Aggregate Year-to-Date > \$ 100	
E. Full Name, Mailing Address and ZIP Code VOID		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code VOID		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code VOID		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	

TOTAL of Receipts This Page (optional)

\$1,600

TAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Decoupled Summary Page

PAGE 8 OF 18
FOR LINE NUMBER 11a(1)

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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Banco Properties For the partner of:			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
B. Full Name, Mailing Address and ZIP Code James Banda See Supplement	Name of Employer Banco Co. 1061 Main St, Industrial Pk North Huntingdon, PA 15642	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 200
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation President		
Aggregate Year-to-Date > \$ 500			
C. Full Name, Mailing Address and ZIP Code James Beste 1145 Cedar Rd. Ambler, PA 19002	Name of Employer Self-Employed 350 Sentry Pky Bg 630 Blue Bell, PA 19422	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Attorney		
Aggregate Year-to-Date > \$1,000			
D. Full Name, Mailing Address and ZIP Code Arthur Boyle Box 400, Baywood Road Laughlintown, PA 15655-0400	Name of Employer	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Businessman		
Aggregate Year-to-Date > \$1,000			
E. Full Name, Mailing Address and ZIP Code John Drosdick 912 Rock Creek Road Bryn Mawr, PA 19010	Name of Employer Sun Co. 1801 Market Street Philadelphia, PA 19103	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation President & COO		
Aggregate Year-to-Date > \$ 500			
F. Full Name, Mailing Address and ZIP Code Robert Eberly 142 Heritage Hills Road Uniontown, PA 15401	Name of Employer Eberly & Heade Inc. PO Box 2023 Uniontown, PA 15401	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Chairman		
Aggregate Year-to-Date > \$ 2,000			
G. Full Name, Mailing Address and ZIP Code Clark Harrison 4597 Logans Ferry Rd. Murrysville, PA 15668-9747	Name of Employer CQ Inc. 160 Quality Center Rd. Homer City, PA 15748	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation President/CEO		
Aggregate Year-to-Date > \$ 500			

SUBTOTAL of Receipts This Page (optional)

\$4,200

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules
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FOR LINE NUMBER
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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KELCO Enterprises Sole Proprietorship for:			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code Jay Hilary Kelley 300 Maple Drive Greensburg, PA 15601	Name of Employer Kelco Enterprises 307 S. PA Avenue Greensburg, PA 15601	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation President		
	Aggregate Year-to-Date > \$ 500		
C. Full Name, Mailing Address and ZIP Code Fred Lebder 14 Judith Street Uniontown, PA 15401	Name of Employer	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$ 500		
D. Full Name, Mailing Address and ZIP Code Patrick McShane 125 Fourth Avenue Scottdale, PA 15683	Name of Employer	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$ 500		
E. Full Name, Mailing Address and ZIP Code Gerard Neyer 283 Derrick Avenue Uniontown, PA 15401	Name of Employer Driver Train/Carnegie Mellon 700 Technology Drive Pittsburgh, PA 15230-2950	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation President		
	Aggregate Year-to-Date > \$ 500		
F. Full Name, Mailing Address and ZIP Code Ronald Raimondo PO Box 181 Latrobe, PA 15650-0181	Name of Employer Keystone Waterproofing PO Box 181 Latrobe, PA 15650-0181	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation President		
	Aggregate Year-to-Date > \$ 500		
G. Full Name, Mailing Address and ZIP Code Ronald Rubin 243 Conshohocken State Rd. Narberth, PA 19072	Name of Employer Preit-Rubin Inc. 200 S. Broad St/Fl. 3 Philadelphia, PA 19102	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation CEO-Real Estate Dev.		
	Aggregate Year-to-Date > \$ 1,000		

TOTAL of Receipts This Page (optional)

\$3,500

TOTAL This Period (last page this line number only)

CHECK A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER 11a(1)

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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code James Saly 1122 Havana Avenue Johnstown, PA 15904 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Barnes, Saly & Co LLP 201 Atlas Street Johnstown, PA 15905 Occupation CPA Aggregate Year-to-Date > \$ 600	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
B. Full Name, Mailing Address and ZIP Code Conrad Semensky 204 Front Street Mount Pleasant, PA 15666 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer See Supplement Occupation See Supplement Aggregate Year-to-Date > \$ 100	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 100
C. Full Name, Mailing Address and ZIP Code Jack Shaw 2710 Bedford Street Johnstown, PA 15904 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Cat Claw Inc. 2710 Bedford Street Johnstown, PA 15904 Occupation President Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
D. Full Name, Mailing Address and ZIP Code Eli Shumar, Jr. RD 1, Box 228B Grindstone, PA 15442 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Shumar Welding & Machine RD #1, Box 228B Grindstone, PA 15442 Occupation President Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
E. Full Name, Mailing Address and ZIP Code James Snyder 171 Fieldgate Drive Pittsburgh, PA 15241 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Assad Iron & Metals Inc Box 76 Albany Road Brownsville, PA 15417 Occupation Owner Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
F. Full Name, Mailing Address and ZIP Code Edna Truxal 108 South Fifth Street Youngwood, PA 15697 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Penn State Tool & Die 7590 Rt. 30 N. Huntingdon, PA 15607 Occupation Chairman of the Board Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
G. Full Name, Mailing Address and ZIP Code Elizabeth White 138 Allegheny Avenue Kittanning, PA 15201 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer White Enterprises 265 South Jefferson Kittanning, PA 16201 Occupation Owner Aggregate Year-to-Date > \$ 400	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 250

TOTAL of Receipts This Page (optional)

\$2,850

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Thomas Carter, Jr. PO Box 6383 Philadelphia, PA 19139		Name of Employer City of Philadelphia City Hall Philadelphia, PA 19107	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Deputy Mayor	Aggregate Year-to-Date > \$ 250	
B. Full Name, Mailing Address and ZIP Code William Coyle 208 Melvin Street Johnstown, PA 15904		Name of Employer Concurrent Tech. Corp. Industrial Park Johnstown, PA 15904	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 50
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Technology Analyst	Aggregate Year-to-Date > \$ 50	
C. Full Name, Mailing Address and ZIP Code Vincent Florica 106 Weaver Court Johnstown, PA 15905		Name of Employer Lee Hospital 312 Main Street #3F Johnstown, PA 15901	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Physician	Aggregate Year-to-Date > \$ 250	
D. Full Name, Mailing Address and ZIP Code Martin Grass 10714 Greenspring Avenue Lutherville, MD 21093		Name of Employer Rite Aid Corp. PO Box 3165 Harrisburg, PA 17105	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Chairman & CEO	Aggregate Year-to-Date > \$ 500	
E. Full Name, Mailing Address and ZIP Code Luci Holuta 153 Valley Road — Indiana, PA 15701-9015		Name of Employer Reschini Agency Inc. 922 Philadelphia St. Indiana, PA 15701	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Agent	Aggregate Year-to-Date > \$1,000	
F. Full Name, Mailing Address and ZIP Code Thomas Kiral 22 Overlook Drive Indiana, PA 15701-2203		Name of Employer Reschini Agency Inc. 922 Philadelphia Street Indiana, PA 15701	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Vice-President	Aggregate Year-to-Date > \$1,000	
G. Full Name, Mailing Address and ZIP Code Gene McDonald PO Box 758 Latrobe, PA 15650		Name of Employer McDonald Snyder & Will 1005 Courtyard Plaza Latrobe, PA 15650	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 200
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Attorney	Aggregate Year-to-Date > \$ 400	

TOTAL of Receipts This Page (optional)

\$3,250

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Monsour Partnership For the Partners of:	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code Howard Monsour 1020 Dearborn Road Greensburg, PA 15601	Name of Employer Monsour Medical Center 70 Lincoln Way E Jeannette, PA 15644	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period 333.33
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Doctor	Aggregate Year-to-Date > \$ 333.33	
C. Full Name, Mailing Address and ZIP Code Roy Monsour RD 6, Box 206G Greensburg, PA 15601	Name of Employer Monsour Medical Center 70 Lincoln Way E Jeannette, PA 15644	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period 333.33
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Doctor	Aggregate Year-to-Date > \$ 333.33	
D. Full Name, Mailing Address and ZIP Code Robert Monsour Box 348 Huntington Farm Ligonier, PA 15658	Name of Employer Monsour Medical Center 70 Lincoln Way E. Jeannette, PA 15644	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period 333.34
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Doctor	Aggregate Year-to-Date > \$ 333.34	
E. Full Name, Mailing Address and ZIP Code Robin Reschini 690 School Street Indiana, PA 15701	Name of Employer Reschini Ins. Agency 922 Philadelphia St. Indiana, PA 15701	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Agent	Aggregate Year-to-Date > \$ 1,000	
F. Full Name, Mailing Address and ZIP Code Roger Reschini 11 Pine Crest Drive Indiana, PA 15701	Name of Employer Reschini Ins. Agency 922 Philadelphia St. Indiana, PA 15701	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1,000	
G. Full Name, Mailing Address and ZIP Code Scott Tuxer 118 Chapel View Drive Greensburg, PA 15601	Name of Employer Commercial Stone Co. 2200 Springfield Pike Connellsville, PA 15425	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 200
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Controller	Aggregate Year-to-Date > \$ 200	

SUBTOTAL of Receipts This Page (optional)

\$3,200

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Gary Abrams 12255 N. LaCholla Blvd. Tucson, AZ 85742		Name of Employer Abrams Airborne Mfg. 3735 N. Romero Road Tucson, AZ 85705	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation President	Aggregate Year-to-Date > \$ 1,000	
B. Full Name, Mailing Address and ZIP Code Paul Baker 3740 E. 34th Street Tucson, AZ 85713		Name of Employer Self-Employed 3740 E. 34th Street Tucson, AZ 85713	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Private Investor	Aggregate Year-to-Date > \$ 500	
C. Full Name, Mailing Address and ZIP Code E. Michael Carlier 4942 Via Condessa Tucson, AZ 85718		Name of Employer Carlier Co. 3561 E. Sunrise #215 Tucson, AZ 85718	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation President	Aggregate Year-to-Date > \$ 250	
D. Full Name, Mailing Address and ZIP Code Donald Diamond 7200 N. Finger Rock Tucson, AZ 85718		Name of Employer DRD Assoc. 2200 East River Rd. #115 Tucson, AZ 85718	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation President/Self-Emp.	Aggregate Year-to-Date > \$ 1,500	
E. Full Name, Mailing Address and ZIP Code Robert Edmund 310 Bridgeboro Road Moorestown, NJ 08057		Name of Employer Edmund Scientific Co. 101 E. Gloucester Pike Barrington, NJ 08007-1380	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation CEO	Aggregate Year-to-Date > \$1,000	
F. Full Name, Mailing Address and ZIP Code David Goldstein 1560 E. Placita Lupita Tucson, AZ 85718		Name of Employer Diamond Ventures 2200 E. River Road Tucson, AZ	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Chief Financial Off.	Aggregate Year-to-Date > \$ 250	
G. Full Name, Mailing Address and ZIP Code Houghton 22 Partnership For the partner of:		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	

JB TOTAL of Receipts This Page (optional)

\$3,500

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Gregory Wexler 8215 N. Cortaro Road Tucson, AZ 85743		Name of Employer Wexler & Assoc. 130 W. River Road Tucson, AZ 85704	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 375
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Managing Partner	Aggregate Year-to-Date > \$ 375	
B. Full Name, Mailing Address and ZIP Code KAI Farms For the Partner of:		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code Herb Kai 2305 W. Ruthrauff Tucson, AZ 85705		Name of Employer Kai Farms 2305 W. Ruthrauff Tucson, AZ 85705	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Partner	Aggregate Year-to-Date > \$ 250	
D. Full Name, Mailing Address and ZIP Code Steven Lightman 3691 N. Round Rock Drive Tucson, AZ 85715		Name of Employer Arizona Mail Order Co. Tucson, AZ 85715	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation CEO	Aggregate Year-to-Date > \$ 500	
E. Full Name, Mailing Address and ZIP Code Marana 154 Partnership For the partner of:		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code Gregory Wexler 8215 N. Cortaro Road Tucson, AZ 85743		Name of Employer Wexler & Assoc. 7085 W. Huntington Dr. Tucson, AZ 85743	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 375
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Managing Partner	Aggregate Year-to-Date > \$ 750	
G. Full Name, Mailing Address and ZIP Code David Mehl 7598 N. Secret Canyon Dr. Tucson, AZ 85718		Name of Employer Cottonwood Properties 3587 E. Sunrise #219 Tucson, AZ 85718	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation President	Aggregate Year-to-Date > \$ 250	

TOTAL of Receipts This Page (optional)

\$1,750

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SCHEDULE A

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Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Raul Pina 3801 E. Calle Guaymas Tucson, AZ 85716		Name of Employer Collins-Pina Engineers 33 N. Stone #1500 Tucson, AZ 85701	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation CEO/General Plnr.	Aggregate Year-to-Date > \$ 250	
B. Full Name, Mailing Address and ZIP Code S. Lee Pozez 6959 N. Javelina Drive Tucson, AZ 85718		Name of Employer Self-Employed 6959 N. Javelina Drive Tucson, AZ 85718	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Private Investor	Aggregate Year-to-Date > \$ 500	
C. Full Name, Mailing Address and ZIP Code Mrs. S. Lee Pozez 6959 N. Javelina Drive Tucson, AZ 85718		Name of Employer Self-Employed 6959 N. Javelina Drive Tucson, AZ 85718	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Private Investor	Aggregate Year-to-Date > \$ 500	
D. Full Name, Mailing Address and ZIP Code Bobby Present 10 Calle Encanto Tucson, AZ 85716		Name of Employer Dain Rausher 1785 West Hwy. 89A Tucson, AZ 86336	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Manager	Aggregate Year-to-Date > \$ 250	
E. Full Name, Mailing Address and ZIP Code Michael Racy 535 W. Burton Drive Tucson, AZ 85704		Name of Employer Racy & Assoc. 535 W. Burton Drive Tucson, AZ 85704	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation President	Aggregate Year-to-Date > \$ 250	
F. Full Name, Mailing Address and ZIP Code S.L. Schoor 560 Via Guadalupe Tucson, AZ 85716		Name of Employer Lewis & Roca 16 Church Street #700 Tucson, AZ 85701	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 100
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Occupation Attorney	Aggregate Year-to-Date > \$ 100	
G. Full Name, Mailing Address and ZIP Code VOID		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$1,850

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SCHEDULE A

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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Jack Brown 732 South Front Street Philadelphia, PA 19147-3519 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Penn Warehouse Inc. 2147 S. Columbus Rd. Philadelphia, PA 19148 Occupation Trucking & Warehousing Aggregate Year-to-Date > \$1,000	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$1,000
B. Full Name, Mailing Address and ZIP Code Rose Brown 732 South Front Street Philadelphia, PA 19147-3519 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Marty's Express PO Box 17580 Philadelphia, PA 19135 Occupation See Supplement Aggregate Year-to-Date > \$1,000	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$1,000
C. Full Name, Mailing Address and ZIP Code John Brown, Jr. 129 South Street Philadelphia, PA 19147 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Penn Warehouse Inc. 2147 S. Columbus Rd. Philadelphia, PA 19148 Occupation Trucking & Warehousing Aggregate Year-to-Date > \$1,000	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$1,000
D. Full Name, Mailing Address and ZIP Code Lorraine Brown 129 South Street Philadelphia, PA 19147 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Lucent Technologies 1301 Ave./Americas 12th Fl. New York, NY Occupation See Supplement Aggregate Year-to-Date > \$1,000	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$1,000
E. Full Name, Mailing Address and ZIP Code Terence Brown 7 Iron Gate Lane Medford, NJ 08055 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Penn Warehouse Inc. 2147 S. Columbus Blvd. Philadelphia, PA 19148 Occupation Trucking & Warehousing Aggregate Year-to-Date > \$1,000	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$1,000
F. Full Name, Mailing Address and ZIP Code Tecri Brown 7 Iron Gate Lane Medford, NJ 08055 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Housewife Aggregate Year-to-Date > \$1,000	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$1,000
G. Full Name, Mailing Address and ZIP Code Thomas Brown, Jr. 480 Ellwood Avenue Atco, NJ 08004 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Penn Warehouse Inc. 2147 S. Columbus Rd. Philadelphia, PA 19148 Occupation Trucking & Warehousing Aggregate Year-to-Date > \$1,000	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$1,000

TOTAL of Receipts This Page (optional)

\$7,000

TOTAL This Period (last page this line number only)

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)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Sharon Brown 480 Ellwood Avenue Atco, NJ 08004 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Housewife Aggregate Year-to-Date > \$1,000	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$1,000
B. Full Name, Mailing Address and ZIP Code Timothy Brown 34 Harvest Lane Medford, NJ 08055-8450 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Penn Warehouse Inc. 2147 S. Columbus Blvd Philadelphia, PA 19148 Occupation Trucking & Warehousing Aggregate Year-to-Date > \$1,000	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$1,000
C. Full Name, Mailing Address and ZIP Code Judy Brown 34 Harvest Lane Medford, NJ 08055-8450 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Housewife Aggregate Year-to-Date > \$1,000	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$1,000
D. Full Name, Mailing Address and ZIP Code Paul Cacciamani 200 Main Street Peckville, PA 18452 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Synergist Tech. Group 10 Enterprise Drive Carbondale, PA 18407 Occupation President Aggregate Year-to-Date > \$2,000	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$1,000
E. Full Name, Mailing Address and ZIP Code Lawrence Filiaggi RD #6, Box 634 Uniontown, PA 15401 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$500	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$500
F. Full Name, Mailing Address and ZIP Code VOID Receipt For: ☐ Primary ☐ General ☐ 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 VOID Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, year)	Amount of Each Receipt this Period
TOTAL of Receipts This Page (optional)			\$4,500
This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Don Munce 4332 NE Courtney Drive Lee's Summit, MO 64064 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer NRCCUA 900 SW Oldham Pkwy. Lee's Summit, MO 64081 Occupation President Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$ 500
B. Full Name, Mailing Address and ZIP Code Roosevelt Pope 1806 Fairgrounds Road Hatfield, PA 19440 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer USMGR/Self-Employed 1806 Fairgrounds Rd. Hatfield, PA 19440 Occupation Maj./Small Businessman Aggregate Year-to-Date > \$ 200	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$ 200
C. Full Name, Mailing Address and ZIP Code Stephen Wojdak 124 W. Chestnut Hill Avenue Philadelphia, PA 19118 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer The Bellevue 200 S. Broad St. #850 Philadelphia, PA 19102 Occupation Attorney Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 11/23/98	Amount of Each Receipt this Period \$1,000
D. Full Name, Mailing Address and ZIP Code VOID	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 VOID	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 VOID	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 VOID	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 	Amount of Each Receipt this Period
TOTAL of Receipts This Page (optional)			\$1,700
L This Period (last page this line number only)			\$54,550

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code American Federation of State, County & Municipal Employees 1625 L Street, NW Washington, DC 20036 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 10,000	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$5,000
B. Full Name, Mailing Address and ZIP Code American Medical PAC 1101 Vermont Avenue, NW Washington, DC 20005 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,500	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$1,500
C. Full Name, Mailing Address and ZIP Code Cleveland-Cliffs Inc. PAC 18th Floor, 1100 Superior Avenue Cleveland, OH 44114 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 500
D. Full Name, Mailing Address and ZIP Code Comm. on Letter Carriers PAC 100 Indiana Avenue, NW Washington, DC 20001 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 3,000	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$1,000
E. Full Name, Mailing Address and ZIP Code CSA America Inc. PAC 945 E. Paces Ferry Road #2110 Atlanta, GA 30326 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 500
F. Full Name, Mailing Address and ZIP Code GPU Power PAC 801 Pennsylvania Avenue #310 Washington, DC 20004 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 4,500	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 500
G. Full Name, Mailing Address and ZIP Code Hoechst Marion Roussel Inc. PAC PO Box 9627 Kansas City, MO 64134-0627 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 500

SUBTOTAL of Receipts This Page (optional)

\$9,500

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Laborer's Political League 905-16th Street, NW Washington, DC 20006 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 7,500	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$2,500
B. Full Name, Mailing Address and ZIP Code Leadership '98 1800 K Street, NW #710 Washington, DC 20005 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 5,000	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$5,000
C. Full Name, Mailing Address and ZIP Code Mason & Hanger Corp. PAC 2355 Harrodsburg Road Lexington, KY 40504-3363 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 250	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 250
D. Full Name, Mailing Address and ZIP Code NEMPAC-Nat'l Emergency Medicine PAC PO Box 619911 Dallas, TX 75261-9911 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$1,000
E. Full Name, Mailing Address and ZIP Code Oshkosh Truck Corp. PAC 2307 Oregon Street, Box 2566 Oshkosh, WI 54903-2566 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 3,000	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$1,000
F. Full Name, Mailing Address and ZIP Code Prostate Cancer Research PAC 212 N. Sangamon Street #14 Chicago, IL 60607-1711 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 3,000	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 500
G. Full Name, Mailing Address and ZIP Code Realtor's PAC 430 N. Michigan Avenue Chicago, IL 60611 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$1,000

SUBTOTAL of Receipts This Page (optional)

\$11,250

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Realtor's PAC 430 N. Michigan Avenue Chicago, IL 60611	Name of Employer Occupation	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$4,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 5,000		
B. Full Name, Mailing Address and ZIP Code Rite Aid PAC PO Box 3165 Harrisburg, PA 17105	Name of Employer Occupation	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$1,000		
C. Full Name, Mailing Address and ZIP Code SBC-EnPAC 175 E. Houston Rm. 4-B-4 San Antonio, TX 78205	Name of Employer Occupation	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 500		
D. Full Name, Mailing Address and ZIP Code VOID	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code VOID	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code VOID	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code VOID	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$5,000

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code ACPA PAC American Concrete Pavement Assn. 5420 Old Orchard Road Suite A100 Skokie, IL 60077	Name of Employer Occupation	Date (month, day, year) 11-03-98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$1,000		
B. Full Name, Mailing Address and ZIP Code Anheuser-Busch PAC c/o 1850 K Street, NW Washington, DC 20006	Name of Employer Occupation	Date (month, day, year) 11-03-98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$1,000		
C. Full Name, Mailing Address and ZIP Code AOPA-Aircraft Owners & Pilots PAC 500 E. Street, SW #920 Washington, DC 20024	Name of Employer Occupation	Date (month, day, year) 11-03-98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$1,000		
D. Full Name, Mailing Address and ZIP Code COREPAC-Corning Inc. Employees PAC 1350 I Street, NW #500 Washington, DC 20005-3305	Name of Employer Occupation	Date (month, day, year) 11-03-98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 500		
E. Full Name, Mailing Address and ZIP Code Deloitte & Touche LLP PAC PO Box 365 Washington, DC 20044-0365	Name of Employer Occupation	Date (month, day, year) 11-03-98	Amount of Each Receipt this Period \$ 250
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 250		
F. Full Name, Mailing Address and ZIP Code Drive Political Fund 25 Louisiana Avenue, NW Washington, DC 20001	Name of Employer Occupation	Date (month, day, year) 11-03-98	Amount of Each Receipt this Period \$5,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$2,500		
G. Full Name, Mailing Address and ZIP Code General Atomics PAC PO Box 22930 San Diego, CA 92122	Name of Employer Occupation	Date (month, day, year) 11-03-98	Amount of Each Receipt this Period \$3,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 10,000		

SUBTOTAL of Receipts This Page (optional)

\$11,750

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Nat'l Association of Life Underwriters Political Action Committee 1922 F Street, NW Washington, DC 20006	Name of Employer Occupation	Date (month, day, year) 11/03/98	Amount of Each Receipt this Period \$2,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$2,000		
B. Full Name, Mailing Address and ZIP Code North Side Good Gov't Comm. 300 Stadium Circle Pittsburgh, PA 15212	Name of Employer Occupation	Date (month, day, year) 11/03/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$1,000		
C. Full Name, Mailing Address and ZIP Code PECO Energy PAC 2301 Market Street Philadelphia, PA 19103-1338	Name of Employer Occupation	Date (month, day, year) 11/03/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$2,500		
D. Full Name, Mailing Address and ZIP Code Pilot's Society PAC PO Box 906 Philadelphia, PA 19105-0906	Name of Employer Occupation	Date (month, day, year) 11/03/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$1,000		
E. Full Name, Mailing Address and ZIP Code Thelen Reid & Priest LLP PAC 701 PA Avenue, NW #800 Washington, DC 20004	Name of Employer Occupation	Date (month, day, year) 11/03/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$1,000		
F. Full Name, Mailing Address and ZIP Code VOID	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code VOID	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$5,500

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Buchanan Ingersoll PC Comm. for Eff. Gov't 1 Oxford Center, 20th Floor 301 Grant Street Pittsburgh, PA 15219-1410	Name of Employer Occupation 	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 4,000		
B. Full Name, Mailing Address and ZIP Code Comcast Corp. PAC 1500 Market Street Philadelphia, PA 19102	Name of Employer Occupation 	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 500		
C. Full Name, Mailing Address and ZIP Code Crown Cork & Seal Co. PAC 1 Crown Way Philadelphia, PA 19154	Name of Employer Occupation 	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
D. Full Name, Mailing Address and ZIP Code FEL Corp. PAC 1 Central Avenue Farmingdale, NJ 07727	Name of Employer Occupation 	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 500		
E. Full Name, Mailing Address and ZIP Code VOID	Name of Employer Occupation 	Date (month, day, year) 	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code PNCBANKPAC Two PNC Plaza Pittsburgh, PA 15222-2719	Name of Employer Occupation 	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 5,500		
G. Full Name, Mailing Address and ZIP Code Reed Smith PAC 1301 K Street, NW East Tower Suite 1100 Washington, DC 20005-3317	Name of Employer Occupation 	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		

TOTAL of Receipts This Page (optional)

\$4,500

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules
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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Reid & Priest PAC 701 PA Avenue, NW #800 Washington, DC 20004	Name of Employer Occupation	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 2,000		
B. Full Name, Mailing Address and ZIP Code SPD PAC 13500 Roosevelt Blvd. Philadelphia, PA 19116	Name of Employer Occupation	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$1,000 -
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 3,000		
C. Full Name, Mailing Address and ZIP Code SPD PAC 13500 Roosevelt Blvd. Philadelphia, PA 19116	Name of Employer Occupation	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 4,000		
D. Full Name, Mailing Address and ZIP Code SPD PAC 13500 Roosevelt Blvd. Philadelphia, PA 19116	Name of Employer Occupation	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$1,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 5,000		
E. Full Name, Mailing Address and ZIP Code SUN PAC 1801 Market Street 10-Penn Center Philadelphia, PA 19103	Name of Employer Occupation	Date (month, day, year) 11/04/98	Amount of Each Receipt this Period \$ 500
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,500		
F. Full Name, Mailing Address and ZIP Code VOID	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code VOID	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		

GRAND TOTAL of Receipts This Page (optional)

\$4,500

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Computer Science Corp. PAC 2100 E. Grand Avenue El Segundo, CA 90245 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer — Occupation Aggregate Year-to-Date > \$3,000	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$1,000
B. Full Name, Mailing Address and ZIP Code Desert Caucus PAC PO Box 31554 Tucson, AZ 85751 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$1,500	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$1,500
C. Full Name, Mailing Address and ZIP Code Gas Employees PAC 1515 Wilson Blvd. Arlington, VA 22209 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 500
D. Full Name, Mailing Address and ZIP Code McGuire Woods Battle & Boothe PAC One James Center Richmond, VA 23219 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11/12/98	Amount of Each Receipt this Period \$ 500
E. Full Name, Mailing Address and ZIP Code VOID Receipt For: ☐ Primary ☐ General ☐ 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 VOID Receipt For: ☐ Primary ☐ General ☐ 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 VOID Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

JB TOTAL of Receipts This Page (optional)

\$3,500

JTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER 11c

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 committees.

NAME OF COMMITTEE (In Full)

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code I.B.E.W.-C.O.P.E. 1125-15th Street, NW Washington, DC 20005 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 3,000	Date (month, day, year) 11-23-98	Amount of Each Receipt this Period \$ 1,000
B. Full Name, Mailing Address and ZIP Code VOID Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code VOID Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code VOID Receipt For: ☐ Primary ☐ General ☐ 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 VOID Receipt For: ☐ Primary ☐ General ☐ 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 VOID Receipt For: ☐ Primary ☐ General ☐ 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 VOID Receipt For: ☐ Primary ☐ General ☐ 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)

\$ 1,000

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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FOR LINE NUMBER 11c

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

Murtha for Congress Committee

A. Full Name, Mailing Address and ZIP Code Carpenter's Legislative Improvement Committee 101 Constitution Ave., NW Washington, DC 20001		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$2,000
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Aggregate Year-to-Date > \$ 4,500		
B. Full Name, Mailing Address and ZIP Code VOID		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code VOID		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code VOID		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code VOID		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code VOID		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code VOID		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Aggregate Year-to-Date > \$		
TOTAL of Receipts This Page (optional)				\$ 2,000
C This Period (Enter page this line number only)				\$58,500

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (in Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code TRIBUNE REVIEW PUBLISHING CO. CABIN HILL DRIVE GREENSBURG, PA 15601 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer SUBSCRIPTION REFUND Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period 125.00
B. Full Name, Mailing Address and ZIP Code HYATT CORP.-DBA HYATT REGENCY WASHINGTON 400 NEW JERSEY AVE., N.W. WASHINGTON, DC 20001 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer FUND RAISER RECP. EXP. REFUND Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period 209.44
C. Full Name, Mailing Address and ZIP Code VOID Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code VOID Receipt For: ☐ Primary ☐ General ☐ 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 VOID Receipt For: ☐ Primary ☐ General ☐ 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 VOID Receipt For: ☐ Primary ☐ General ☐ 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 VOID Receipt For: ☐ Primary ☐ General ☐ 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)

334.44

TOTAL This Period (last page this line number only)

334.44

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER 15

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NAME OF COMMITTEE (in Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code LAUREL BANK 534 MAIN STREET JOHNSTOWN, PA 15901 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer INTEREST Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/30/98	Amount of Each Receipt this Period 112.81
B. Full Name, Mailing Address and ZIP Code VOID Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code VOID Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code VOID Receipt For: ☐ Primary ☐ General ☐ 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 VOID Receipt For: ☐ Primary ☐ General ☐ 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 VOID Receipt For: ☐ Primary ☐ General ☐ 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 VOID Receipt For: ☐ Primary ☐ General ☐ 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)

112.81

TOTAL This Period (last page this line number only)

112.81

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 11
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code EDWARD MITCHELL COMM. 126 SOUTH FRANKLIN ST. P. O. BOX 2237 WILKES BARRE, PA 18703	Purpose of Disbursement ADVERTISING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/19/98	Amount of Each Disbursement This Period 80,000.00
B. Full Name, Mailing Address and ZIP Code LAUREL BANK 534 MAIN STREET JOHNSTOWN, PA 15901	Purpose of Disbursement WIRE CHARGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/19/98	Amount of Each Disbursement This Period 17.00
C. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

80,017.00

TOTAL This Period (last page this line number only)

SCHEDULE B
ITEMIZED DISBURSEMENTS

 Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code GULFSTREAM 1000 WILSON BLVD., SUITE 2701 ARLINGTON, VA 22209	Purpose of Disbursement TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 2,164.00
B. Full Name, Mailing Address and ZIP Code THERESA VOYTKO 920 FRONHEISER ST. JOHNSTOWN, PA 15902	Purpose of Disbursement WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98 11/03/98 11/18/98	Amount of Each Disbursement This Period 522.76 522.76 522.76
C. Full Name, Mailing Address and ZIP Code JOSEPH SCHATZDORFER 220 BEDFORD ST. JOHNSTOWN, PA 15901	Purpose of Disbursement WAGES WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98 10/29/98 11/03/98	Amount of Each Disbursement This Period 49.44 49.44 49.44
D. Full Name, Mailing Address and ZIP Code JOSEPH SCHATZDORFER 220 BEDFORD ST. JOHNSTOWN, PA 15901	Purpose of Disbursement WAGES WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98 11/18/98	Amount of Each Disbursement This Period 47.17 36.08
E. Full Name, Mailing Address and ZIP Code NATIONAL FINANCE CENTER DPRS-BILLING UNIT P. O. BOX 61760 NEW ORLEANS, LA 70161	Purpose of Disbursement EMPLOYEE BENEFIT-HOSP. EMPLOYEE BENEFIT-HOSP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98 11/18/98	Amount of Each Disbursement This Period 98.54 98.54
F. Full Name, Mailing Address and ZIP Code PA UC FUND LABOR & INDUSTRY BUILDING SEVENTH & FORSTER STREETS P. O. BOX 68568 HARRISBURG, PA 17106-8568	Purpose of Disbursement PAYROLL TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 14.44
G. Full Name, Mailing Address and ZIP Code PA DEPT. OF REVENUE DEPT. 280415 HARRISBURG, PA 17128-0415	Purpose of Disbursement STATE I/T W/H Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 143.25
H. Full Name, Mailing Address and ZIP Code CENTRAL TAX BUREAU OF PA., INC. 1610 BEDFORD STREET JOHNSTOWN, PA 15902	Purpose of Disbursement LOCAL TAX W/H Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 68.08
I. Full Name, Mailing Address and ZIP Code POSTMASTER JOHNSTOWN, PA	Purpose of Disbursement POSTAGE POSTAGE-MASS MAILING EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98 10/26/98	Amount of Each Disbursement This Period 320.00 9,307.86

SUBTOTAL of Disbursements This Page (optional)

14,014.56

TOTAL This Period (last page this line number only)

SCHEDULE B
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code POSTMASTER JOHNSTOWN, PA	Purpose of Disbursement POSTAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/18/98	Amount of Each Disbursement This Period 2,240.00
B. Full Name, Mailing Address and ZIP Code CASH JOHNSTOWN, PA	Purpose of Disbursement POSTAGE, GIFTS, MEALS, CAMPAIGN OFFICE SUPPLIES, VOL. EXP. & TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 63.20
C. Full Name, Mailing Address and ZIP Code CASH JOHNSTOWN, PA	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES, TICKETS & VOL. EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/29/98	Amount of Each Disbursement This Period 65.49
D. Full Name, Mailing Address and ZIP Code CASH JOHNSTOWN, PA	Purpose of Disbursement VOL. EXP., GIFTS, TICKETS & CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/03/98	Amount of Each Disbursement This Period 82.88
E. Full Name, Mailing Address and ZIP Code CASH JOHNSTOWN, PA	Purpose of Disbursement VOL. EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/18/98	Amount of Each Disbursement This Period 53.39
F. Full Name, Mailing Address and ZIP Code GREATER JOHNSTOWN WATER AUTHORITY P. O. BOX 1287 JOHNSTOWN, PA 15907-1287	Purpose of Disbursement UTILITIES UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98 11/12/98	Amount of Each Disbursement This Period 2.75 2.89
G. Full Name, Mailing Address and ZIP Code CITY OF JOHNSTOWN-BUREAU OF SEWAGE P. O. BOX 608 JOHNSTOWN, PA 15907	Purpose of Disbursement UTILITIES UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98 11/18/98	Amount of Each Disbursement This Period 8.16 16.72
H. Full Name, Mailing Address and ZIP Code UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	Purpose of Disbursement FREIGHT FREIGHT FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98 10/29/98 11/03/98	Amount of Each Disbursement This Period 58.71 104.96 164.00
I. Full Name, Mailing Address and ZIP Code UPS P. O. BOX 4980 HAGERSTOWN, MD 21747-4980	Purpose of Disbursement FREIGHT FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98 11/18/98	Amount of Each Disbursement This Period 105.50 40.50

SUBTOTAL of Disbursements This Page (optional)

3,009.15

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

 Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code GTE-NORTH P. O. BOX 31222 TAMPA, FL 33631-3222	Purpose of Disbursement TELEPHONE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 754.81
B. Full Name, Mailing Address and ZIP Code BENNETT, PETTS & BLUMENTHAL 1010 WISCONSIN AVE., N.W. SUITE 208 WASHINGTON, DC 20007	Purpose of Disbursement SURVEY EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 11,200.00
C. Full Name, Mailing Address and ZIP Code WHJE BROADCAST COMMUNICATIONS, INC. P. O. BOX 23623 PITTSBURGH, PA 15222-6623	Purpose of Disbursement ADVERTISING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 495.00
D. Full Name, Mailing Address and ZIP Code KANE & CO. ADVERTISING 1334 FRANKLIN ST. JOHNSTOWN, PA 15905	Purpose of Disbursement ADVERTISING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 5,808.68
E. Full Name, Mailing Address and ZIP Code RONALD HUFFINE P. O. BOX 114 LEISERLING, PA 15455	Purpose of Disbursement POLL WORKERS & WATCHERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/28/98	Amount of Each Disbursement This Period 200.00
F. Full Name, Mailing Address and ZIP Code BERNADINE GREGO 114 RIDGE BLVD. CONNELLSVILLE, PA 15425	Purpose of Disbursement POLL WORKERS & WATCHERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/28/98	Amount of Each Disbursement This Period 200.00
G. Full Name, Mailing Address and ZIP Code ERNEST SHANABERGER R. D. #2, BOX 421-A UNIONTOWN, PA 15401	Purpose of Disbursement POLL WORKERS & WATCHERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/28/98	Amount of Each Disbursement This Period 200.00
H. Full Name, Mailing Address and ZIP Code ETHEL ROBY R. D. #5, BOX 320 UNIONTOWN, PA 15401	Purpose of Disbursement POLL WORKERS & WATCHERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/28/98	Amount of Each Disbursement This Period 200.00
I. Full Name, Mailing Address and ZIP Code MICHAEL MERKOSKY, JR. P. O. BOX 261 OLIVER, PA 15472	Purpose of Disbursement POLL WORKERS & WATCHERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/28/98	Amount of Each Disbursement This Period 200.00

SUBTOTAL of Disbursements This Page (optional)

19,258.49

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code MARY PILLAR P. O. BOX 13 OLIVER, PA 15472	Purpose of Disbursement POLL WORKERS & WATCHERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/28/98	Amount of Each Disbursement This Period 200.00
B. Full Name, Mailing Address and ZIP Code RONALD T. LANDMAN, SR. R. D. #1, BOX 102-B LEMONT FURNACE, PA 15456	Purpose of Disbursement POLL WORKERS & WATCHERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/28/98	Amount of Each Disbursement This Period 200.00
C. Full Name, Mailing Address and ZIP Code MIRANDA ADENHART P. O. BOX 231 MOUNT BRADDOCK, PA 15465	Purpose of Disbursement POLL WORKERS & WATCHERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/28/98	Amount of Each Disbursement This Period 200.00
D. Full Name, Mailing Address and ZIP Code MARK KASHERY 415 JEFFERSON TRAIL CHALK HILL, PA 15421	Purpose of Disbursement POLL WORKERS & WATCHERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/28/98	Amount of Each Disbursement This Period 200.00
E. Full Name, Mailing Address and ZIP Code ALICE BURD R. D. #1, BOX 21 FARMINGTON, PA 15437	Purpose of Disbursement POLL WORKERS & WATCHERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/28/98	Amount of Each Disbursement This Period 200.00
F. Full Name, Mailing Address and ZIP Code GPU ENERGY P. O. BOX 391 ALLENHURST, NJ 07709-0005	Purpose of Disbursement UTILITIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/29/98	Amount of Each Disbursement This Period 112.85
G. Full Name, Mailing Address and ZIP Code AT&T WIRELESS 2630 LIBERTY AVENUE PITTSBURGH, PA 15222	Purpose of Disbursement TELEPHONE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/29/98	Amount of Each Disbursement This Period 62.57
H. Full Name, Mailing Address and ZIP Code STAPLES CREDIT PLAN P. O. BOX 30292 SALT LAKE CITY, UTAH 84130	Purpose of Disbursement COMPUTER PAYMENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/29/98	Amount of Each Disbursement This Period 500.00
I. Full Name, Mailing Address and ZIP Code JAMES OSWALD 307 STATE STREET, APT. B-10 JOHNSTOWN, PA 15905	Purpose of Disbursement MEALS & CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/29/98	Amount of Each Disbursement This Period 92.66

SUBTOTAL of Disbursements This Page (optional)

1,768.08

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SCHEDULE B
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NAME OF COMMITTEE (in Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code MBNA-MASTER CARD FOR THE FOLLOWING: P. O. BOX 15469 WILMINGTON, DE 19886-5469	Purpose of Disbursement CHECK DATED 10/29/98 \$1,471.76 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
B. Full Name, Mailing Address and ZIP Code THE PALM ISLE RESTAURANT JOHNSTOWN, PA. EAT N PARK RESTAURANT JOHNSTOWN, PA.	Purpose of Disbursement MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/18/98 9/20/98	Amount of Each Disbursement This Period 13.67 19.95
C. Full Name, Mailing Address and ZIP Code EL RANCHO STEAKHOUSE JOHNSTOWN, PA. EAT N PARK RESTAURANT JOHNSTOWN, PA	Purpose of Disbursement MEALS MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/22/98 10/11/98	Amount of Each Disbursement This Period 14.93 18.45
D. Full Name, Mailing Address and ZIP Code EXXON USA ARLINGTON, VA EXXON USA JOHNSTOWN, PA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/26/98 9/23/98	Amount of Each Disbursement This Period 12.36 10.00
E. Full Name, Mailing Address and ZIP Code EXXON USA JOHNSTOWN, PA EXXON USA JOHNSTOWN, PA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/04/98 10/10/98	Amount of Each Disbursement This Period 8.00 8.40
F. Full Name, Mailing Address and ZIP Code SHEETZ, INC. FREDERICK, MD EXXON USA JOHNSTOWN, PA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/09/98 10/13/98	Amount of Each Disbursement This Period 17.50 17.00
G. Full Name, Mailing Address and ZIP Code EASYGRADE AUTO WASH JOHNSTOWN, PA EASYGRADE AUTO WASH JOHNSTOWN, PA	Purpose of Disbursement TRAVEL TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/19/98 9/19/98	Amount of Each Disbursement This Period 12.00 12.00
H. Full Name, Mailing Address and ZIP Code EASYGRADE AUTO WASH JOHNSTOWN, PA OUR SONS' FAMILY RESTAURANT JOHNSTOWN, PA	Purpose of Disbursement TRAVEL VOL. EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/28/98 9/19/98	Amount of Each Disbursement This Period 12.00 90.00
I. Full Name, Mailing Address and ZIP Code BORDERS BOOKS & MUSIC BAILEYS CROSS, VA McCORRY STORE JOHNSTOWN, PA	Purpose of Disbursement GIFTS OFFICE EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/27/98 9/17/98	Amount of Each Disbursement This Period 84.65 31.80

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382.71

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code MBNA-MASTER CARD FOR THE FOLLOWING: P. O. BOX 15469 (CONTINUED) WILMINGTON, DE 19886-5469	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
B. Full Name, Mailing Address and ZIP Code CHEZ ANDREE RESTAURANT ALEXANDRIA, VA THE RITZ CARLTON ARLINGTON, VA	Purpose of Disbursement FUND RAISER RECP. EXP. FUND RAISER RECP. EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9/29/98 10/01/98	Amount of Each Disbursement This Period 286.51 65.06
C. Full Name, Mailing Address and ZIP Code U. S. HOUSE-MEMBERS DIN WASHINGTON, DC U. S. HOUSE OF REPRESENTATIVES WASHINGTON, DC	Purpose of Disbursement FUND RAISER RECP. EXP. FUND RAISER RECP. EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/08/98 9/29/98	Amount of Each Disbursement This Period 259.55 110.64
D. Full Name, Mailing Address and ZIP Code HOLIDAY INNS EXPRESS JOHNSTOWN, PA HOLIDAY INNS EXPRESS JOHNSTOWN, PA	Purpose of Disbursement LODGING LODGING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/13/98 10/13/98	Amount of Each Disbursement This Period 68.48 68.48
E. Full Name, Mailing Address and ZIP Code HOLIDAY INNS EXPRESS JOHNSTOWN, PA HOLIDAY INNS EXPRESS JOHNSTOWN, PA	Purpose of Disbursement LODGING LODGING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/13/98 10/13/98	Amount of Each Disbursement This Period 68.48 68.48
F. Full Name, Mailing Address and ZIP Code MBNA WILMINGTON, DE MBNA WILMINGTON, DE	Purpose of Disbursement FINANCE CHARGE LATE CHARGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/16/98 10/16/98	Amount of Each Disbursement This Period 18.37 75.00
G. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1,089.05

TOTAL This Period (last page this line number only)

SCHEDULE B
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code JAMES OSWALD 307 STATE STREET, APT. B-10 JOHNSTOWN, PA 15905	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES & MEALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98	Amount of Each Disbursement This Period 64.05
B. Full Name, Mailing Address and ZIP Code SOUTHERN ALLEGHENIES ADVERTISING 667 INDUSTRIAL PARK ROAD EBENSBURG, PA 15931	Purpose of Disbursement ADVERTISING MATERIALS ADVERTISING MATERIALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/29/98 11/18/98	Amount of Each Disbursement This Period 450.50 642.00
C. Full Name, Mailing Address and ZIP Code BRIER GROUP 116 N. WASHINGTON AVE., SUITE 2B SCRANTON, PA 18503	Purpose of Disbursement POLITICAL CONSULTING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/29/98	Amount of Each Disbursement This Period 4,166.67
D. Full Name, Mailing Address and ZIP Code SUSAN O'NEILL & ASSOC. 5910 CLOSTER ROAD BETHESDA, MD 20816	Purpose of Disbursement PUBLIC RELATIONS EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/29/98	Amount of Each Disbursement This Period 2,000.00
E. Full Name, Mailing Address and ZIP Code CONGRESSIONAL CLUB 2001 NEW HAMPSHIRE AVENUE WASHINGTON, DC 20009	Purpose of Disbursement GIFTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/03/98	Amount of Each Disbursement This Period 186.00
F. Full Name, Mailing Address and ZIP Code LAUREL BANK 534 MAIN STREET JOHNSTOWN, PA 15901	Purpose of Disbursement PAYROLL TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/03/98	Amount of Each Disbursement This Period 462.84
G. Full Name, Mailing Address and ZIP Code JOHNSTOWN REDEVELOPMENT AUTHORITY 4TH FLOOR PUBLIC SAFETY BLDG. JOHNSTOWN, PA 15901	Purpose of Disbursement RENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/03/98	Amount of Each Disbursement This Period 660.00
H. Full Name, Mailing Address and ZIP Code MARY CATHERINE VOYTKO 920 FRONHEISER STREET JOHNSTOWN, PA 15902	Purpose of Disbursement WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/03/98	Amount of Each Disbursement This Period 63.22
I. Full Name, Mailing Address and ZIP Code DOLLAR SHOPPER 2447 BEDFORD ST. JOHNSTOWN, PA 15904	Purpose of Disbursement AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/03/98	Amount of Each Disbursement This Period 20.00

SUBTOTAL of Disbursements This Page (optional)

8,715.28

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SCHEDULE B

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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code ROBERT C. ONDICK, CPA, PC SUITE 220, BT FINANCIAL PLAZA 551 MAIN STREET JOHNSTOWN, PA 15901	Purpose of Disbursement ACCOUNTING SERVICES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/03/98	Amount of Each Disbursement This Period 1,300.00
B. Full Name, Mailing Address and ZIP Code GOLD KEY LEASE 300 OXFORD DRIVE, SUITE 310 MONROEVILLE, PA 15146	Purpose of Disbursement VEHICLE RENTAL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/03/98	Amount of Each Disbursement This Period 603.30
C. Full Name, Mailing Address and ZIP Code CHUCK MAMULA PHOTOGRAPHY 186 FAIRFIELD AVENUE JOHNSTOWN, PA 15906	Purpose of Disbursement PHOTO EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/03/98	Amount of Each Disbursement This Period 194.36
D. Full Name, Mailing Address and ZIP Code AT&T P. O. BOX 27680 KANSAS CITY, MO 64184-0680	Purpose of Disbursement TELEPHONE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/03/98	Amount of Each Disbursement This Period 332.38
E. Full Name, Mailing Address and ZIP Code BENSHOFF PRINTING CO. 46 VALLEY PIKE JOHNSTOWN, PA 15905	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/03/98 11/12/98	Amount of Each Disbursement This Period 739.88 149.46
F. Full Name, Mailing Address and ZIP Code VARIOUS CAMPAIGN WORKERS 292 X \$5.00 202 X \$10.00 244 X \$20.00	Purpose of Disbursement POLL WORKERS & WATCHERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/03/98	Amount of Each Disbursement This Period 8,360.00
G. Full Name, Mailing Address and ZIP Code IKON 1069 E. PARK DRIVE HARRISBURG, PA 17111	Purpose of Disbursement COPIER MAINTENANCE AGREEMENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98	Amount of Each Disbursement This Period 345.98
H. Full Name, Mailing Address and ZIP Code JANWAY 11 ACADEMY ROAD COGAN STATION, PA 17728-9300	Purpose of Disbursement GIFTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98	Amount of Each Disbursement This Period 289.23
I. Full Name, Mailing Address and ZIP Code DAYLILY FLORAL & GIFT SHOP P. O. BOX 403 DAVIDSVILLE, PA 15928	Purpose of Disbursement FLORAL ARRANGE. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98	Amount of Each Disbursement This Period 74.20

SUBTOTAL of Disbursements This Page (optional)

12,388.79

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NAME OF COMMITTEE (In Full)
MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code BELLO'S 421 MAIN STREET JOHNSTOWN, PA 15901	Purpose of Disbursement VOLUNTEER EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98	Amount of Each Disbursement This Period 61.20
B. Full Name, Mailing Address and ZIP Code CLASSIC CATERING 612 BROAD ST. JOHNSTOWN, PA 15906	Purpose of Disbursement ENT. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98	Amount of Each Disbursement This Period 172.40
C. Full Name, Mailing Address and ZIP Code INDIANA GAZETTE P. O. BOX 10 INDIANA, PA 15701	Purpose of Disbursement SUBSCRIPTION PHOTOS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98 11/12/98	Amount of Each Disbursement This Period 163.75 30.00
D. Full Name, Mailing Address and ZIP Code ASSOCIATED OFFICE EQUIP. P. O. BOX 151 TIRE HILL, PA 15959	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98	Amount of Each Disbursement This Period 291.35
E. Full Name, Mailing Address and ZIP Code NORTHERN EXPRESS 338 WALNUT STREET JOHNSTOWN, PA 15901	Purpose of Disbursement GASOLINE-TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98	Amount of Each Disbursement This Period 111.01
F. Full Name, Mailing Address and ZIP Code FEDERAL EXPRESS P. O. BOX 1140 MEMPHIS, TN 38101-1140	Purpose of Disbursement FREIGHT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98	Amount of Each Disbursement This Period 44.50
G. Full Name, Mailing Address and ZIP Code AIREAST CAMBRIA COUNTY AIRPORT JOHNSTOWN, PA 15904	Purpose of Disbursement TRAVEL EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98	Amount of Each Disbursement This Period 1,704.04
H. Full Name, Mailing Address and ZIP Code JUNE LYNN VATTER 215 STEWART STREET SALTSBURG, PA 15681	Purpose of Disbursement PHOTO EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98	Amount of Each Disbursement This Period 35.00
I. Full Name, Mailing Address and ZIP Code SHARKEY'S BUCKNELL AVE. & MILLCREEK ROAD JOHNSTOWN, PA 15905	Purpose of Disbursement TRAVEL-GASOLINE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/12/98	Amount of Each Disbursement This Period 248.99

SUBTOTAL of Disbursements This Page (optional)

2,862.24

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SCHEDULE B

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NAME OF COMMITTEE (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code LAUREL BANK 534 MAIN STREET JOHNSTOWN, PA 15901	Purpose of Disbursement IMPRINTED CHECKS BANK CHARGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/28/98 10/26/98	Amount of Each Disbursement This Period 314.30 5.00
B. Full Name, Mailing Address and ZIP Code MICHELE McGUIRE 616 SUNBERRY ST. JOHNSTOWN, PA 15904	Purpose of Disbursement WAGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/18/98	Amount of Each Disbursement This Period 177.97
C. Full Name, Mailing Address and ZIP Code JOHNSTOWN FOOTBALL BOOSTERS GREATER JOHNSTOWN HIGH SCHOOL CENTRAL AVENUE JOHNSTOWN, PA 15902	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/18/98	Amount of Each Disbursement This Period 200.00
D. Full Name, Mailing Address and ZIP Code CABLECOMM P. O. BOX 371464 PITTSBURGH, PA 15250-7464	Purpose of Disbursement UTIL. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/18/98	Amount of Each Disbursement This Period 32.91
E. Full Name, Mailing Address and ZIP Code IOS CAPITAL P. O. BOX 9115 MACON, GEORGIA 31210	Purpose of Disbursement COPIER PAYMENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/18/98	Amount of Each Disbursement This Period 499.22
F. Full Name, Mailing Address and ZIP Code COVER SUTDIO 504 MAIN STREET JOHNSTOWN, PA 15901	Purpose of Disbursement PHOTOGRAPHY EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/18/98	Amount of Each Disbursement This Period 65.00
G. Full Name, Mailing Address and ZIP Code NUNZIO MEDILE P. O. BOX 12 JOHNSTOWN, PA 15907	Purpose of Disbursement TRAVEL & DINNER MEETINGS EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/18/98	Amount of Each Disbursement This Period 428.40
H. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1,722.80

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145,228.15

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NAME OF COMMITTEE (in Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code ARMSTRONG COUNTY DEMOCRATIC COMM. c/o STEVE BLAKAIR 2237 PARK AVENUE FORD CITY, PA 16226	Purpose of Disbursement TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 75.00
B. Full Name, Mailing Address and ZIP Code RON KLINK FOR CONGRESS COMM. P. O. BOX 15491 PITTSBURGH, PA 15237	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 1,000.00
C. Full Name, Mailing Address and ZIP Code BILL COYNE FOR CONGRESS COMM. 915 GRANT BLDG., 310 GRANT ST. PITTSBURGH, PA 15219	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code AFFLERBACH FOR CONGRESS P. O. BOX 20605 LEHIGH VALLEY, PA 18002-0605	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 1,000.00
E. Full Name, Mailing Address and ZIP Code HOEFFEL FOR CONGRESS COMM. 700 E. JOHNSON HWY. NORRISTOWN, PA 19401	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 1,000.00
F. Full Name, Mailing Address and ZIP Code FRIENDS OF MAURICE HINCHEY P. O. BOX 4497 KINGSTON, NY 12402	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 1,000.00
G. Full Name, Mailing Address and ZIP Code LEONARD BOSWELL FOR CONGRESS COMM. P. O. BOX 823 INDIANOLA, IA 50125	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 1,000.00
H. Full Name, Mailing Address and ZIP Code BENSHOFF PRINTING CO. 46 VALLEY PIKE JOHNSTOWN, PA 15905	Purpose of Disbursement IN-KIND CONTRI. INV. & REPLY CARDS COMM. TO ELECT KAREN HUGYA TO STATE COMM. PO BOX 69 SOMERSET PA 15501 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/22/98	Amount of Each Disbursement This Period 486.54
I. Full Name, Mailing Address and ZIP Code RAMADA INN EXIT 10 PA TURNPIKE P. O. BOX 511 SOMERSET, PA 15501	Purpose of Disbursement IN-KIND CONTRI. FUND RAISER RECP. EXP. COMM. TO ELECT KAREN HUGYA TO STATE COMM. PO BOX 69 SOMERSET PA 15501 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/29/98	Amount of Each Disbursement This Period 1,741.50

SUBTOTAL of Disbursements This Page (optional)

8,303.04

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ITEMIZED DISBURSEMENTS

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

 PAGE 2 OF 2
FOR LINE NUMBER 21

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)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code WESTMORELAND COUNTY DEMOCRAT COMM. 331 SOUTH MAIN STREET GREENSBURG, PA 16226	Purpose of Disbursement TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/29/98	Amount of Each Disbursement This Period 900.00
B. Full Name, Mailing Address and ZIP Code INDIANA COUNTY DEMOCRATIC COMM. 35 SOUTH EIGHTH STREET INDIANA, PA 15701	Purpose of Disbursement TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/29/98	Amount of Each Disbursement This Period 105.00
C. Full Name, Mailing Address and ZIP Code SARA STEELMAN FOR STATE REP. c/o GEORGE BILGER 20 SHADY DRIVE INDIANA, PA 15701	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/29/98	Amount of Each Disbursement This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code MIKE TAYLOR FOR CONGRESS 405 WEST MAIN ST. ALBERMARLE, NC 28001	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/29/98	Amount of Each Disbursement This Period 1,000.00
E. Full Name, Mailing Address and ZIP Code ELECT TOM TANGRETTI COMM. P. O. BOX 292 INDIANA, PA 15701	Purpose of Disbursement CONTRI. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/03/98	Amount of Each Disbursement This Period 300.00
F. Full Name, Mailing Address and ZIP Code UNION SOCIAL CLUB 57 CLINTON ST. JOHNSTOWN, PA 15901	Purpose of Disbursement CONTRI. FOR RALLY EXPENSE FRIENDS OF ED. WOJNAROSKI 235 LINCOLN ST., PO BOX 1069 JOHNSTOWN, PA 15901 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/18/98	Amount of Each Disbursement This Period 125.00
G. Full Name, Mailing Address and ZIP Code TONY PERRY 788 CASE AVENUE JOHNSTOWN, PA 15905	Purpose of Disbursement REIMB. RALLY EXP WEST HILLS DEM. CLUB JOHNSTOWN, PA Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/18/98	Amount of Each Disbursement This Period 167.00
H. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code VOID	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

3,597.00

TOTAL This Period (last page this line number only)

11,900.04

SCHEDULE C
(Revised 3/80)

LOANS

Page 1 of 1 for
LINE NUMBER 13A
(Use separate schedules
for each numbered line)

Name of Committee (In Full)

MURTHA FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code of Loan Source JOHNSTOWN BANK & TRUST CO. P. O. BOX 98 JOHNSTOWN, PA 15907 Election: ☐ Primary ☐ General ☐ Other (specify):		Original Amount of Loan \$20,000.00 LINE OF CREDIT ON VISA ACCT.	Cumulative Payment To Date	Balance Outstanding at Close of This Period \$1,787.03 SEE ATTACHED SCH. C-1
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr)		☐ Secured		
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code JOHN P. MURTHA 109 COLGATE AVENUE JOHNSTOWN, PA 15905		Name of Employer U. S. HOUSE OF REP.		
		Occupation CONGRESSMAN		
		Amount Guaranteed Outstanding: \$SEE SCH. C-1		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source		Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: ☐ Primary ☐ General ☐ Other (specify):				
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr)		☐ Secured		
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		

SUBTOTALS This Period This Page (optional)

\$1,787.03

TOTALS This Period (last page in this line only)

\$1,787.03

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

NAME OF COMMITTEE (IN FULL) <u>MULTIHA FOR CONGRESS COMMITTEE</u>	FEC IDENTIFICATION NUMBER <u>04134300019075</u>	
FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER) <u>MBNA AMERICA</u> <u>1000 SANSATE DRIVE</u> <u>WILMINGTON DE 19874-0404</u>	AMOUNT OF LOAN <u>MAX. \$20,000 Account</u> <u>\$20,000</u>	INTEREST RATE (APR) <u>17.9%</u>
	DATE INCURRED OR ESTABLISHED <u>02/27/98</u>	DATE DUE <u>REVOLVING</u>

A. Has loan been restructured? ☒ No ☐ Yes If yes, date originally incurred: _____

B. If line of credit, amount of this draw: NA; total outstanding balance: \$1787.03 11/23/98
TOTAL COMMITMENT

C. Are other parties secondarily liable for the debt incurred?

☐ No ☒ Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?

☒ No ☐ Yes If yes, specify: _____

What is the value of this collateral? _____

Does the lender have a perfected security interest in it?

☐ No

☐ Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?

☒ No ☐ Yes If yes, specify: _____ What is the estimated value? _____

A depository account must be established pursuant to 11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account established: _____ Location of account: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

PERSONAL GUARANTEE of JOHN P. MARTHA

G. COMMITTEE TREASURER

TYPED NAME ROBERT C. ONDICK

Robert C. Ondick

DATE

12/01/98

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.

II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.

III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.

AUTHORIZED REPRESENTATIVE

J. Martha

TYPED NAME

J. Martha

SIGNATURE

TITLE

ASSISTANT MANAGER

DATE

11/30/98

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
MURTHA FOR CONGRESS COMMITTEE				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor STAPLES CREDIT PLAN P. O. BOX 30292 SALT LAKE CITY, UTAH 84130	1,391.49	-0-	500.00	891.49
Nature of Debt (Purpose): COMPUTER & ACCESSORIES				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor IKON-IOS CAPITAL P. O. BOX 9115 MACON, GEORGIA 31210	2,745.71	-0-	499.22	2,246.49
Nature of Debt (Purpose): LEASE PAYMENT PHOTOCOPIER & ACCESS.				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor SOUTHERN ALLEGHENIES ADVERTISING 667 INDUSTRIAL PARK ROAD EBENSBURG, PA 15931	142.00	2,138.50	1,092.50	1,188.00
Nature of Debt (Purpose): ADVERTISING MATERIALS				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor ROBERT C. ONDICK, CPA, P.C. BT FINANCIAL PLAZA - SUITE 220 551 MAIN STREET JOHNSTOWN, PA 15901	-0-	1,938.34	1,300.00	638.34
Nature of Debt (Purpose): REIMBURSEMENT FOR COPIES, FAX, TELEPHONE & POSTAGE ACCOUNTING SERVICES				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor GTE NORTH P. O. BOX 31222 TAMPA, FL 33631-3222	-0-	1,655.08	754.81	900.27
Nature of Debt (Purpose): TELEPHONE				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor CAMBRIA MAILING SERVICES P. O. BOX 325 2092 FOREST HILLS DRIVE ELTON, PA 15934-0325	-0-	1,911.00	-0-	1,911.00
Nature of Debt (Purpose): MASS MAILING EXPENSE				

1) SUBTOTALS This Period This Page (optional)	7,775.59
2) TOTALS This Period (last page in this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
MURTHA FOR CONGRESS COMMITTEE				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor BLAEMIRE COMMUNICATIONS 1890 PRESTON WHITE DRIVE, SUITE 105 RESTON, VIRGINIA 20191-5430	-0-	1,029.86	-0-	1,029.86
Nature of Debt (Purpose): MASS MAILING EXPENSE				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor CATERING BY DESIGN 110 EAST HECTOR STREET CONSHOHOCKEN, PA 19428	-0-	2,065.10	-0-	2,065.10
Nature of Debt (Purpose): FUND RAISER RECEP. EXPENSE				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor VOID				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor VOID				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor VOID				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor VOID				
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	3,094.96
2) TOTALS This Period (last page in this line only)	10,870.55
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	1,787.03
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	12,657.58

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.

☐ Hand Delivered Date of Receipt

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12/2/98

☐ No Postmark

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Records Date of Receipt

☐ Other (Specify): Postmarked
and/or Date of Receipt

☐ Electronic Filing

AA
PREPARER

12/5/98
DATE PREPARED