

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1. NAME OF COMMITTEE (in full) REILLY FOR CONGRESS		2. FEC IDENTIFICATION NUMBER C00350868
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 37 WEST MARKET STREET, SUITE 18		
CITY, STATE and ZIP CODE YORK, PA 17401	STATE/DISTRICT PA/19	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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 following the General Election on _____ in the State of _____

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>July 1, 1999</u> through <u>Dec. 31, 1999</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	69,175.25	69,175.25
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	69,175.25	69,175.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6,036.52	6,036.52
(b) Total Offsets to Operating Expenditures (from Line 14)	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	6,036.52	6,036.52
8. Cash on Hand at Close of Reporting Period (from Line 27)	63,138.73	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
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)	672.16	

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 THOMAS W. BUNNELL	Date 1/28/00
Signature of Treasurer <i>Thomas W. Bunnell</i>	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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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) REILLY FOR CONGRESS	Report Covering the Period:	
	From July 1, 1999	To Dec. 31, 1999
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)	66,850.25	
(ii) Unitemized	2,200.00	
(iii) Total of contributions from individuals	69,050.25	69,050.25
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) The Candidate	125.00	125.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	69,175.25	69,175.25
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0	0
(b) All Other Loans	0	0
(c) TOTAL LOANS (add 13(a) and (b))	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0	0
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	69,175.25	69,175.25
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	6,036.52	6,036.52
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	0	0
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	6,036.52	6,036.52

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	0	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	69,175.25	
25. SUBTOTAL (add Line 23 and Line 24)	\$	69,175.25	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$	6,036.52	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$	63,138.73	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 12
FOR LINE NUMBER 11 a1

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)
REILLY FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank H. Countess 138 Summit Drive York, PA 17403	Countess Gilbert Andrews Occupation: Attorney	11/24/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
Rebecca K. Countess 138 Summit Drive York, PA 17403	Homemaker	11/24/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
Bonita Macarthur 6456 Church Road Cross Roads, PA 19322-8314	Homemaker	11/26/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
Louis Appell, Jr. 1700 Powder Mill Road York, PA 17403	Susquehanna Pfaltzgraff CEO	11/30/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
Kevin Potter 9091 Eaton Park Road Great Falls, VA. 22066	Retired	12/07/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
Jeanne Potter 9091 Eaton Park Road Great Falls, VA 22066	self employed Occupation: photographer	12/07/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
David M. Carmen 5111 52nd Court N.W. Washington, D.C. 20016	The David Carmen Group owner	12/07/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

SUBTOTAL of Receipts This Page (optional)

\$ 7,000.00

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)

RBILLY FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Carter 4414 Ridge Street Chevy Chase, MD 20815	self employed	12/07/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation marketing consultant		
	Aggregate Year-to-Date	\$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Valente, III 7056 Leestone Street Springfield, VA 22151	Valente Lake Lopatin & Schulze	12/07/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation principal		
	Aggregate Year-to-Date	\$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Stewart 910 Upland Road York, PA 17403	York Building Products	12/07/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		
	Aggregate Year-to-Date	\$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Angela Stewart 910 Upland Road York, PA 17403		12/07/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		
	Aggregate Year-to-Date	\$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Osborne 1079 Grantly Road York, PA 17404	USA Direct	12/3/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		
	Aggregate Year-to-Date	\$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert R. Lucas 306 Chambers Ridge York, PA 17402-8417	Classic Carmel CO.	12/08/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO		
	Aggregate Year-to-Date	\$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard L. Reinhardt 1365 Detwiler Drive York, PA 17404	Manchester Industries	12/07/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		
	Aggregate Year-to-Date	\$ 1,000.00	

SUBTOTAL of Receipts This Page (optional) \$ 7,000.00

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

PAGE 3 OF 12
FOR LINE NUMBER 11 81

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NAME OF COMMITTEE (in Full)
RILEY FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Thomas C. Norris 330 Rhonda Drive York, PA 17404	P.H. Glatfelter	12/10/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman of Board of Directors Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Josephine Appell 1700 Powder Mill Road York, PA 17403		12/08/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert A. Kinsley 2720 Water Street York, PA 17403	Kinsley Construction	12/13/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President Aggregate Year-to-Date > \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Anne W. Kinsley 2720 Water Street York, PA 17403		12/13/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker Aggregate Year-to-Date > \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Michael J. Prendergast 930 Upland Road York, PA 17403	Urology Associates of York, P.C.	12/15/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jack Giambalvo 230 Mountain Road York, PA 17402	Jack Giambalvo Motor Company, Inc.	12/15/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation owner Aggregate Year-to-Date > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John D. Zimmerman 87 South 8th Street Mt. Wolf, PA 17347		12/14/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$ 1,000.00		

SUBTOTAL of Receipts This Page (optional) \$ 7,000.00

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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FOR LINE NUMBER 11a i

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NAME OF COMMITTEE (In Full)

REILLY FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John W. Giambalvo 208 Knob Creek Lane York, PA 17402	Jack Giambalvo Motor Company, Inc.	12/12/99	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice Pres. of Operation	Aggregate Year-to-Date > \$ 500.00	
Elizabeth A. Berkebile 2881 Woodmont Drive York, PA 17404	Jack Giambalvo Motor Company, Inc.	12/15/99	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Office Manager	Aggregate Year-to-Date > \$ 500.00	
Joseph W. Silbaugh, Jr. 242 South Main Street Shrewsbury, PA 17361	Silbaugh Granite Industries	12/16/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President/owner	Aggregate Year-to-Date > \$ 1,000.00	
Ann O. Silbaugh 242 South Main Street Shrewsbury, PA 17361	Silbaugh Granite Industries	12/16/99	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Accounts Receivable	Aggregate Year-to-Date > \$ 1,000.00	
Charles F. Burnside 4050 Farm Drive York, PA 17402	Maple Doughnuts	12/20/99	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President, Owner	Aggregate Year-to-Date > \$ 1,000.00	
Susan Burnside 4050 Farm Drive York, PA 17402	Maple Doughnuts	12/17/99	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation corporate Secretary	Aggregate Year-to-Date > \$ 1,000.00	
Stewart E. Hartman, Jr. 1385 Wyndham Drive South York, PA 17403	Rutters Farm	12/21/99	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Pres. of CHR Secretary of Dairy	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

\$ 6,000.00

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)
REILLY FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stanton Lebowitz 195 Leaders Heights Road York, PA 17402	Occupation physician	12/22/99	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Ulrich, JR 2970 Dearborn Lane York, PA 17402-3B29	Collens-Wagner Agency, Inc.	12/27/99	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Albert H. Diehl 1885 Whiteford Road York, PA 17402	Diehl Toyota	12/27/99	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation owner Aggregate Year-to-Date > \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joann M. Bankos 882 Heritage Hills Drive York, PA 17402	Collens-Wagner Agency, Inc.	12/27/99	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation insurance agent Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gary E. Jay 2339 Deiningar Road York, PA 17402	Carl Beasley Ford, Inc.	12/22/99	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation owner Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joseph M. Stover 660 Marlow Drive York, PA 17402-4346	First Capital Fibers	12/27/99	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Betty Jo Osborne 7685 Classic Way Atlanta, GA 30350-4433		12/29/99	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$ 1,000.00		

SUBTOTAL of Receipts This Page (optional) \$5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 6 OF 12
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (in full)

REILLY FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael F. McAllister 5217 Elliot Road Bethesda, MD 20816	PM Consulting Corp	12/28/99	\$1,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation: Exec. Vice President	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Maynard W. Osborne 7685 Classic Way Atlanta, GA 30350-4433		12/29/99	\$1,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation: retired	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert L. Yost 2595 Eastern Blvd York, PA 17402	Coldwell Banker Bob Yost Bennett Williams, Inc.	12/27/99	\$2,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation: Broker/owner	Aggregate Year-to-Date > \$ 2,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David L. Bufkin 714 Saint Paul Avenue Reisterstown, MD 21136	USA Direct	12/28/99	\$ 500.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation: president Creative Communications	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward L. Hunton 1354 Merry Hill Court Bel Air, MD. 21015	USA Direct	12/28/99	\$ 500.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation: V.P. Printing Services	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John D. Barnhill 60 Montevieu Drive York, PA 17404	USA Direct	12/28/99	\$ 500.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation: Vice President	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John L. Finleyson 550 Gatehouse Lane, Ext. York, PA 17402	Susquehanna Pfaltzgraff	12/27/99	\$ 500.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation: V.P. Finance & Administration	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional) \$6,000.00

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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FOR LINE NUMBER 11 of 11

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NAME OF COMMITTEE (in Full)

REILLY FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William H. Simpson 2532 Hepplewhite Drive York, PA 17404-1216	Susquehanna Pfaltzgraff Co.	12/23/99	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert A. Minnich 1670 Northview Road York, PA 17402	York County	12/28/99	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation County Commissioner	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Violet M. Miller 6521 Church Road Cross Roads, PA 17322-8315		12/28/99	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dennis Willman 130 Fairfax Drive York, PA 17403	York Container	12/27/99	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William T. Wolf 117 South 7th Street Mount Wolf, PA 17347		12/27/99	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
LeRoy McCarthy 245 Wyndham Drive York, PA 17403	York Oil Service, Inc.	12/29/99	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David S. Alcorn 3490 Harrowgate Road York, PA 17402	Donlee Technologies Inc	12/28/99	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

\$6,000.00

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

PAGE 8 OF 12
FOR LINE NUMBER 11a 1

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)

REILLY FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Matthew J. Ward 429 Shortridge Drive Wynnewood, PA 19096	Posse Walsh Buckman Van Buren	12/23/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance broker	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code George H. Glatfelter, II Box 7052 Woodland Drive Spring Grove, PA 17362	P.H. Glatfelter	12/30/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Pres. & CEO	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code Michael Wareheim R.D. #3, Box 282 Hanover, PA 17331	Snyders of Hanover	12/29/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Corporate officer	Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code Rob Kinsley R.D. #1, Box 131-A Seven Valleys, PA 17360	self employed	12/30/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation architect	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code Robert Stewart, III 2079 Brandywine Lane York, PA 17404	Stewart & Tate	12/30/99	\$ 900.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President of Precast	Aggregate Year-to-Date > \$ 900.00	
F. Full Name, Mailing Address and ZIP Code Dale Voorheis 1150 Overbrook Circle York, PA 17403	Stewart & Tate	12/30/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code Tom Kinsley R.D.#1, Box 131-A Seven Valleys, PA 17360	Kinsley Properties	12/30/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

\$6,900.00

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

PAGE 9 OF 12
FOR LINE NUMBER 11 ai

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NAME OF COMMITTEE (In Full)
REILLY FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David J. Stewart 2802 Lowman Avenue York, PA 17404	York Building Products	12/30/99	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Vice President Aggregate Year-to-Date > \$ 1,000.00		
Steve D. Johnson Pleasant Valley Road York, PA 17402	Homecheck	12/31/99	\$2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Owner Aggregate Year-to-Date > \$ 2,000.00		
Michael Joseph Hudome 10401 Buckboard Place Potomac, MD 20854	MPGH Agency, Inc.	12/31/99	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Political consultant Aggregate Year-to-Date > \$ 1,000.00		
Elizabeth Carter Clifford P.O. Box 207 Hanover, NH 03755		12/31/99	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Homemaker Aggregate Year-to-Date > \$ 500.00		
Chris Kinsley R.D. #1, Box 131-A Seven Valleys, PA 17360	Kinsley Construction	12/31/99	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Vice Pres. of Field Operations Aggregate Year-to-Date > \$ 1,000.00		
Khalil G. Saliba 5802 Grosvenor Lane Bethesda, MD 20814	The Wexler Group	12/30/99	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant Aggregate Year-to-Date > \$ 250.00		
F. Chase Hutto, III 209 Constitution Ave. NE Washington, D.C.	U.S. Senate Judiciary Cmte - sub committee on immigration	12/30/99	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: general counsel Aggregate Year-to-Date > \$ 250.00		

SUBTOTAL of Receipts This Page (optional) \$6,000.00

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

PAGE 10 OF 12
FOR LINE NUMBER 11 a j

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NAME OF COMMITTEE (In Full)

REILLY FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Kurt R. Bauex 40 Indian Rock Dam Road York, PA 17403	Chiro Center	12/22/99	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chiropractor	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code Linda Haugh 4721 York Road New Oxford, PA 17350	New Oxford Elementary School	12/31/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Teacher	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code William H. Kerlin, Jr. 1240 Oakdale Drive York, PA 17403-446B	Graham Capital	12/31/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code T. Michael Haugh 4721 York Road New Oxford, PA 17350	The Altland House Restaurant	12/31/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation owner	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code Pat Kinsley R.D. #1, Box 131-A Seven Valleys, PA 17360	Land Survey Consultant	12/31/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code Alan C. Kingston P.O. Box 191 Emigsville, PA 17318	Trentwyth	12/31/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive semi retired	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code Rhoda Kingston P.O. Box 191 Emigsville, PA 17318		12/31/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

\$ 6,500.00

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

PAGE 11 OF 12
FOR LINE NUMBER 11 ai

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NAME OF COMMITTEE (In Full)

REILLY FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard T. Schulze, Jr. 1820 Creek Crossing Road Vienna, VA 22180	Valente Lake Lopatin Schulze	12/30/99	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation principal	Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Claudia Barker Valente 7055 Leestone Street Springfield, Va 22151	Valente Lake Lopatin Schulze	12/30/99	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation office manager	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jon Kinsley R.D. #1, Box 131-A Seven Valleys, PA 17360	Kinsley Construction	12/30/99	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
J.B. Valente 1054 Whither Grosse Pointe Park, MI 48230	self-employed	12/30/99	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation construction	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Claudia Barker Valente 7055 Leestone Street Springfield, VA. 22151	Valente Lake Lopatin Schulze	11/6/99	\$ 250.25 (in kind)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation office manager	Aggregate Year-to-Date > \$ 500.25	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dean P. Valente 1935 Venier Road Grosse Pointe Woods, MI 48235	self employed	12/30/99	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jeff Poet 2709 S. Queen Street York, PA 17403	Quality Office Products Leasing Co.	11/30/99	\$ 100.00 (in kind)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation proprietor	Aggregate Year-to-Date > \$ 100.00	

SUBTOTAL of Receipts This Page (optional) \$2,350.25

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

PAGE 12 OF 12
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)

REILLY FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jeff Post 2709 S. Queen Street York, Pa 17403 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Quality Office Products Leasing Co.	12/30/99	\$ 100.00 (in kind)
Occupation: Proprietor Aggregate Year-to-Date > \$ 200.00			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	\$ 100.00
TOTAL This Period (last page this line number only)	\$66,850.25

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	2
FOR LINE NUMBER		
17		

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NAME OF COMMITTEE (In Full)
REBILLY FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period (in kind)
Grand Gourmet 1101 17th Street N.W. Washington, D.C. 20036	fundraising event Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/6/99	\$ 250.25
B. Full Name, Mailing Address and ZIP Code Reed Galen 2690 Mount Rose Svenue York, PA 17402	Purpose of Disbursement Consulting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/8/99	Amount of Each Disbursement This Period \$ 2,750.00
C. Full Name, Mailing Address and ZIP Code Reed Galen 2690 Mount Rose Avenue York, PA 17402	Purpose of Disbursement business travel expense reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/8/99	Amount of Each Disbursement This Period \$ 345.47
D. Full Name, Mailing Address and ZIP Code Rosenmiller Building 37 West Markets Street York, PA 17401	Purpose of Disbursement rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/9/99	Amount of Each Disbursement This Period \$ 90.00
E. Full Name, Mailing Address and ZIP Code Allison Coccia 1011 North Front Street Harrisburg, PA 17401	Purpose of Disbursement business travel expense reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/13/99	Amount of Each Disbursement This Period \$ 94.00
F. Full Name, Mailing Address and ZIP Code Office Max 351 Loucks Mill Road York, PA 17404	Purpose of Disbursement office supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/13/99	Amount of Each Disbursement This Period \$ 31.78
G. Full Name, Mailing Address and ZIP Code Reed Galen 2690 Mount Rose Avenue York, PA 17402	Purpose of Disbursement office supplies reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/15/99	Amount of Each Disbursement This Period \$ 30.08
H. Full Name, Mailing Address and ZIP Code Office Max 351 Loucks Mill Road York, PA 17404	Purpose of Disbursement office supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/15/99	Amount of Each Disbursement This Period \$ 62.41
I. Full Name, Mailing Address and ZIP Code Office Max 351 Loucks Mill Road York, PA 17401	Purpose of Disbursement office supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/20/99	Amount of Each Disbursement This Period \$ 13.22

SUBTOTAL of Disbursements This Page (optional)	\$3,667.21
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

REILLY FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Allison Coccia 1011 North Front Street. Harrisburg, PA 17101	consulting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/20/99	\$ 1,600.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Reed Galen 2690 Mount Rose Avenue York, PA 17402	traveling expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/22/99	\$ 133.83
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First Capitol Bank 2951 Whiteford Road York, PA 17402	debit memo Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/8/99	\$ 3.98
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First Capitol Bank 2951 Whiteford Road York, PA 17402	business checks Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/8/99	\$ 104.50
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First Capitol Bank 2951 Whiteford Road York, PA 17402	debit memo Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/28/99	\$ 100.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Reed Galen 2690 Mount Rose Avenue York, PA 17402	reimbursable living expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/23/99	\$ 227.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Quality Office Products Leasing Co. 2909 S. Queen Street York, PA 17403	office equipment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/99	\$ 100.00 (in kind)
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Quality Office Products Leasing Co. 2709 S Queen Street York, PA 17403	office equipment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/30/99	\$ 100.00 (in kind)
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

\$ 2,369.31

TOTAL This Period (last page this line number only)

\$ 6,036.52

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

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

Name of Committee (in Full) REILLY FOR CONGRESS	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor AT & T Wireless Services P.O. Box 13957 Dept. B73 Philadelphia, PA 19101-3957	\$ 405.19	\$ 405.19	\$ 0	\$ 405.19
Nature of Debt (Purpose): telephone service				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Yorktowne Hotel 48 East Market Street York, PA 17401	\$ 136.97	\$ 136.97	\$ 0	\$ 136.97
Nature of Debt (Purpose): business meeting				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Reed Galen 2690 Mount Rose Avenue York, PA 17402	\$ 30.00	\$ 30.00	\$ 0	\$ 30.00
Nature of Debt (Purpose): office furniture				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Friends of Chris Reilly P.O. Box 225 Dallastown, PA 17313	\$100.00	\$ 100.00	\$ 0	\$ 100.00
Nature of Debt (Purpose): equipment rental				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor 				
Nature of Debt (Purpose): 				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor 				
Nature of Debt (Purpose): 				
1) SUBTOTALS This Period This Page (optional)				\$ 672.16
2) TOTALS This Period (last page in this line only)				\$ 672.16
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				0
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				\$ 672.16

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 1/31/00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>J.A.D.</i> PREPARER	 <i>3/7/00</i> DATE PREPARED