

COYNE FOR CONGRESS

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JAN 30 10 05 AM '98

307 Halket Street
Pittsburgh, Pennsylvania 15213

January 29, 1998

VIA UPS OVERNIGHT

Federal Election Commission
999 E Street, NW
Washington, D.C. 20463

RE: *Coyne for Congress - FEC I.D. #C00119701*
January 31, 1997 Year End Report

Dear Sir or Madam:

Enclosed please find the January 31, 1997 Year-End Report for the above-referenced Committee. A copy of said report will be filed with the Commonwealth of Pennsylvania Department of State, Bureau of Elections.

Sincerely,



Frederick N. Frank, Treasurer

FNF:sch
Enclosure

cc: Commonwealth of Pennsylvania
Department of State - Bureau of Elections
North Office Building, Room 305
Harrisburg, PA 17120

The Honorable William J. Coyne
Member of Congress
307 Halket Street
Pittsburgh, PA 15213

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUN 30 10 05 AM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) COYNE FOR CONGRESS COMMITTEE c/o Frederick N. Frank		2. FEC IDENTIFICATION NUMBER C00119701
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 33rd Floor, Gulf Tower		
CITY, STATE and ZIP CODE Pittsburgh, PA 15219	STATE/DISTRICT PA/14	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

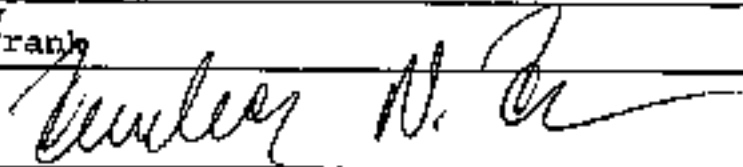
- | | |
|---|--|
| <input type="checkbox"/> April 15 Quarterly Report | <input type="checkbox"/> 12-Day Pre-Election Report for the _____
(Type of Election) |
| <input type="checkbox"/> July 15 Quarterly Report | election on _____ in the State of _____ |
| <input type="checkbox"/> October 15 Quarterly Report | <input type="checkbox"/> 30-Day Post-Election Report for the _____
(Type of Election) |
| <input checked="" type="checkbox"/> January 31 Year End Report | election on _____ in the State of _____ |
| <input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | <input type="checkbox"/> Termination Report |

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

SUMMARY

5. Covering Period <u>7/1/97</u> through <u>12/31/97</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$ 91,608.00	\$ 139,158.00
(b) Total Contribution Refunds (from Line 20(d))	-0-	-0-
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$ 91,608.00	\$ 139,158.00
7. Net Operating Expenditures	\$ 14,217.71	\$ 27,226.88
(a) Total Operating Expenditures (from Line 17)		
(b) Total Offsets to Operating Expenditures (from Line 14)	-0-	\$ 2,188.29
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	\$ 14,217.71	\$ 25,038.59
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$ 116,371.90	For further information contact: Federal Election Commission 889 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-218-3420
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)	-0-	

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 Frederick N. Frank		Date 1/29/98
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. §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 (or Unit)	Report Covering the Period:	
COYNE FOR CONGRESS COMMITTEE	From: 7/1/97	To: 12/31/97
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) -----	\$ 48,050.00	
(ii) Unitemized -----	\$ 458.00	
(iii) Total of contributions from individuals -----	\$ 48,508.00	\$ 55,058.00
(b) Political Party Committees -----	-0-	-0-
(c) Other Political Committees (such as PACs) -----	\$ 43,100.00	\$ 85,158.00
(d) The Candidate -----	-0-	-0-
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) -----	\$ 91,608.00	\$ 139,158.00
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-	\$ 2,188.29
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----	-0-	-0-
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----	\$ 91,608.00	\$ 141,346.29
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES -----	\$ 14,217.71	\$ 27,226.88
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 -----	\$ 5,008.00	\$ 8,173.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----	\$ 19,235.71	\$ 35,399.88
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$	43,999.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$	91,608.00
25. SUBTOTAL (add Line 23 and Line 24) -----	\$	135,607.61
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$	19,235.71
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$	116,371.90

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1

OF 9

FOR LINE NUMBER 11 (a) (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 (to file)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
James H. Davidson 1101 Pennsylvania Ave. NW #81 Washington, DC 20004	Davidson & Company	9/24/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Lobbyist Aggregate Year-to-Date: \$ 500.00		
H. FULL NAME, MAILING ADDRESS AND ZIP CODE Harry E. Thomas 242 Deerfield Road Methen, PA 19066	NAME OF EMPLOYER Karr-Birth Associates Investment	DATE (MONTH, DAY, YEAR) 10/2/97	AMOUNT OF EACH RECEIPT THIS PERIOD 400.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant Aggregate Year-to-Date: \$ 400.00		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Alan W. Wolff 20 Brindle Court Pulmonco, MD 20854-3887	NAME OF EMPLOYER Dewey Ballantine	DATE (MONTH, DAY, YEAR) 11/26/97	AMOUNT OF EACH RECEIPT THIS PERIOD 500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Partner Aggregate Year-to-Date: \$ 500.00		
I. FULL NAME, MAILING ADDRESS AND ZIP CODE Lazar M. Palmick 1216 Highbury Street Pittsburgh, PA 15206	NAME OF EMPLOYER Univ. of Pgs. Medical Center	DATE (MONTH, DAY, YEAR) 12/09/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$ 1,000.00		
J. FULL NAME, MAILING ADDRESS AND ZIP CODE J. Mabon Childs 3433 Alhambra Avenue Pittsburgh, PA 15217	NAME OF EMPLOYER Parker-Dunier	DATE (MONTH, DAY, YEAR) 12/09/97	AMOUNT OF EACH RECEIPT THIS PERIOD 200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Investment Consultant Aggregate Year-to-Date: \$ 200.00		
K. FULL NAME, MAILING ADDRESS AND ZIP CODE James W. Brabain 606 Poplar Court Pittsburgh, PA 15238	NAME OF EMPLOYER Parker-Hunter	DATE (MONTH, DAY, YEAR) 12/09/97	AMOUNT OF EACH RECEIPT THIS PERIOD 200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Investment Consultant Aggregate Year-to-Date: \$ 200.00		
L. FULL NAME, MAILING ADDRESS AND ZIP CODE David Hurstin 1150 Six PPG Place Pittsburgh, PA 15222	NAME OF EMPLOYER Hend. Hurstin & Runette Insurance	DATE (MONTH, DAY, YEAR) 12/9/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant Aggregate Year-to-Date: \$ 1,000.00		
SUBTOTAL (if Sample See Page 2, 4, 6, 8)			
TOTAL (See Notes, last page this Form and 1041-1043)			

This schedule
should be filed
with your Form
1040 or Form
1041

FOR LINE NUMBER
11(a) (7)

Any information required from such Reports and documents may not be used or used by any person for the purpose of establishing a liability for income tax purposes other than using the amount and date of any payment or amount to which the donor is entitled.

NAME OF COMMITTEE (or IDB)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT (USD PERIOD)
Arthur G. Pidel 333 Forbes Avenue Pittsburgh, PA 15222	Self-Employed	12/09/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION Attorney Amount Year-to-Date \$ 1,000.00		
Patrick J. Coyne 129 Chillingwood Court Cranberry Township, PA 16066	Self-Employed	12/09/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION Self-Employed Amount Year-to-Date \$ 1,000.00		
B. LYNNE COYNE 129 Chillingwood Court Cranberry Township, PA 16066	Homemaker	12/09/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION Homemaker Amount Year-to-Date \$ 1,000.00		
C. CURTIS B. COPELAND 423 Walnut Street, #407 Larrachburg, PA 17101	A.L.B.R.F.	12/09/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION Attorney Amount Year-to-Date \$ 1,000.00		
D. WILLIAM F. MARCUS 112 Cambria Road Pittsburgh, PA 15237-2805	Markwalk Corporation	12/09/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION President Amount Year-to-Date \$ 1,000.00		
E. GERALD J. VORAS 146 N. Bellefield Avenue #701 Pittsburgh, PA 15213	Retired	12/09/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION Retired Amount Year-to-Date \$ 1,000.00		
F. ANDREW ALNE 1340 High Oak Court Pittsburgh, PA 15241	Shenango Corporation	12/09/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION Businessman Amount Year-to-Date \$ 1,000.00		

SUBTOTAL (if Receipts from Page 2 omitted).....

TOTAL (This total includes amounts from page 2).....

SCHEDULE A

ITEMIZED RECEIPTS

Any information reported here must be supported by the donor's records. Do not include any amounts for the purpose of making contributions for a political campaign, including the amount of any political contribution to a candidate for office, or to a political party.

NAME OF COMMITTEE (to file)
 COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
William A. Fago 1 Wellington Woods Drive Pittsburgh, PA 15229	Self-Employed	12/09/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Self-Employed		
	Aggregate Year-to-Date: \$ 1,000.00		
James E. Agnos 73 Lebanon Hill Dr Pittsburgh, PA 15228	Bank of America Triangle Tech	12/09/97	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		
L.H. Rudolph 1064 Lyndhurst Drive Pittsburgh, PA 15206	NAME OF EMPLOYER: McKnight Development	12/09/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Chairman		
	Aggregate Year-to-Date: \$ 500.00		
John A. Caputo 3 Gateway Center Pittsburgh, PA 15222	NAME OF EMPLOYER: John Caputo & Associates	12/09/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Attorney		
	Aggregate Year-to-Date: \$ 500.00		
Eugene F. McKinney 325 Fairview Road Pittsburgh, PA 15238-1725	NAME OF EMPLOYER: Federated Investors	12/11/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Executive		
	Aggregate Year-to-Date: \$ 1,000.00		
Frederick B. Sargent P.O. Box 30 Pittsburgh, PA 15230	NAME OF EMPLOYER: Sargent Electric	12/15/97	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		
Frederick B. Sargent P.O. Box 30 Pittsburgh, PA 15230	NAME OF EMPLOYER: Sargent Electric	12/15/97	1,000.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: President		
	Aggregate Year-to-Date: \$ 1,000.00		
SUBTOTAL of Receipts this Page (optional):			
TOTAL, this Period (must be the same as (i)):			

SCHEDULE A

ITEMIZED RECEIPTS

This receipt is subject to the rules of the Internal Revenue Code.	PAGE 4	OF 5
	FILE LINE NUMBER 11(a) (5)	

All information reported on this and Supporting Statements may not be used by anyone for the purpose of making distributions or for any other purpose other than filing the return. All address changes should be notified to the appropriate tax authority.

NAME OF COMMITTEE IN THE
 CONYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE MONTH DAY, YEAR	AMOUNT OF EACH RECEIPT THIS PERIOD
Edwin L. Edwards, 945 Rockland Drive Pittsburgh, PA 15239	Glencorn Broadcast Properties	12/15/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: President-CEO Aggregate Year-to-Date \$ 1,000.00		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Milton A. Washington 5604 Baum Blvd Pittsburgh, PA 15206	NAME OF EMPLOYER Allegheny Housing Rehab. Corporation	DATE MONTH DAY, YEAR 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 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 Seymour Baskin 4415 5th Avenue Pittsburgh, PA 15213	NAME OF EMPLOYER National Development Corp	DATE MONTH DAY, YEAR 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Realtor Aggregate Year-to-Date \$ 1,000.00		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Eugene M. Litman 480 Lincoln Hwy. North Versailles, PA 15137	NAME OF EMPLOYER Self-Employed	DATE MONTH DAY, YEAR 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Merchant Aggregate Year-to-Date \$ 500.00		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE R.M. Litman 3600 One Oxford Center Pittsburgh, PA 15219	NAME OF EMPLOYER Litman, Litman, Harris & Brown	DATE MONTH DAY, YEAR 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Attorney Aggregate Year-to-Date \$ 1,000.00		
F. FULL NAME, MAILING ADDRESS AND ZIP CODE J. Paul Martin 600 Grand Street 42nd Floor Pittsburgh, PA 15219	NAME OF EMPLOYER Eckart, Seamans, Cherin & McJott	DATE MONTH DAY, YEAR 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Attorney Aggregate Year-to-Date \$ 1,000.00		
G. FULL NAME, MAILING ADDRESS AND ZIP CODE Timber Court Partners c/o David O'Loughlin 9 Dunwoody Place Pittsburgh, PA 15217	NAME OF EMPLOYER Timber Court Partners	DATE MONTH DAY, YEAR 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Partnership Aggregate Year-to-Date \$ 1,000.00		
SUBTOTAL (Use Page One for line numbers only):			
TOTAL (Use Form 1041 for line numbers only):			

All information on this page must be reported on Form 278e, Schedule A, of Form 990 (or Form 990-E) for the purpose of including contributions to the account in the account's financial statements. Do not check the box if you are not required to file this schedule.

NAME OF COMMITTEE OR PLAN
 COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE RECEIVED (DAY, MONTH, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
John E. Biegler Jr. 533 Briar Cliff Road Pittsburgh, PA 15221	Thorp, Reed and Armstrong	12/15/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$ 500.00		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Martha Biegler 533 Briar Cliff Road Pittsburgh, PA 15221	NAME OF EMPLOYER Volunteer	DATE RECEIVED (DAY, MONTH, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Volunteer Aggregate Year-to-Date: \$ 500.00		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE William R. Johnson Pine Home Road Sewickley, PA 15143	NAME OF EMPLOYER H.J. Heinz Corporation	DATE RECEIVED (DAY, MONTH, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CEO Aggregate Year-to-Date: \$ 500.00		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE D. Edward Smyth 312 McLean Street Dedford 1100, NY 10807	NAME OF EMPLOYER H.J. Heinz Corporation	DATE RECEIVED (DAY, MONTH, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Aggregate Year-to-Date: \$ 500.00		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Daniel J. Buuker 429 Denniston Avenue Pittsburgh, PA 15206	NAME OF EMPLOYER Kend, Smith, Ahew & McClay	DATE RECEIVED (DAY, MONTH, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$ 1,000.00		
F. FULL NAME, MAILING ADDRESS AND ZIP CODE Neal H. Holmes 2840 Liberty Road Pittsburgh, PA 15234	NAME OF EMPLOYER Allied Security	DATE RECEIVED (DAY, MONTH, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CEO Aggregate Year-to-Date: \$ 500.00		
G. FULL NAME, MAILING ADDRESS AND ZIP CODE Robert I. Glimcher One Mellon Bank Center #200 5111 Grant Street Pittsburgh, PA 15219	NAME OF EMPLOYER Glimcher Group	DATE RECEIVED (DAY, MONTH, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President Aggregate Year-to-Date: \$ 250.00		
SUBTOTAL (do not include page 10 or 11 amounts)			
TOTAL (do not include page 10 or 11 amounts)			

SCHEDULE A

ITEMIZED RECEIPTS

Any amounts reported from such Reports and Transactions may not be taken into account for the purpose of valuing contributions or for charitable purposes, that may bring the donor into violation of any published regulations or other laws before they are received.

NAME OF COMMITTEE (if any)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
Laiba A. Kaszler 352 N Neville Street Pittsburgh, PA 15213	Self-Employed	12/15/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Physician Aggregate Year-to-Date: \$ 500.00		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE William C. Radolph 249 N. Craig Street Pittsburgh, PA 15213	NAME OF EMPLOYER: McKnight Development	DATE (MONTH, DAY, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: President Aggregate Year-to-Date: \$ 500.00		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE John M. Seidman 6839 Juniper Place Pittsburgh, PA 15208	NAME OF EMPLOYER: Self-Employed	DATE (MONTH, DAY, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Consultant Aggregate Year-to-Date: \$ 1,000.00		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Larry Deitch 455 Dover Pittsburgh, PA 15238	NAME OF EMPLOYER: Self-Employed	DATE (MONTH, DAY, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Businessman Aggregate Year-to-Date: \$ 1,000.00		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE L&M Associates One Oxford Center #4500 Pittsburgh, PA 15219-1407	NAME OF EMPLOYER: L&M Associates	DATE (MONTH, DAY, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Partnership Aggregate Year-to-Date: \$ 1,000.00		
F. FULL NAME, MAILING ADDRESS AND ZIP CODE Henry Posner, Jr. 500 Greenbree Commons 381 Mansfield Avenue Pittsburgh, PA 15220	NAME OF EMPLOYER: The Hawthorne Group	DATE (MONTH, DAY, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Executive Aggregate Year-to-Date: \$ 1,000.00		
G. FULL NAME, MAILING ADDRESS AND ZIP CODE Thomas R. Donahue Suite 718, Bigelow Corporate Center Bigelow Square Pittsburgh, PA 15219	NAME OF EMPLOYER: Fedemtel Investors	DATE (MONTH, DAY, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Executive Aggregate Year-to-Date: \$ 1,000.00		
SUBTOTAL (if Example this Page (Optional).....)			
TOTAL (see instructions page 10 for more info).....			

SCHEDULE A

ITEMIZED RECEIPTS

any amount reported on this schedule should be reported on the donor's Form 1041 or Form 1042 for the purpose of deducting contributions on the individual's return, whether or not the donor has provided the name and address of any political committee to which the contribution should be made.

NAME OF COMMITTEE IN CARE OF
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
William D. Dawson III 106 Foxtop Drive Pittsburgh, PA 15238	Federated Investors	12/15/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Chief Investment Officer AGGREGATE YEAR-TO-DATE: \$ 1,000.00		
Arthur L. Cherry Jr. 1001 Liberty Avenue Pittsburgh, PA 15222-3779	Federated Services Co.	12/15/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: President & CEO AGGREGATE YEAR-TO-DATE: \$ 1,000.00		
Glen R. Johnson 4700 Ellsworth Avenue #17 Pittsburgh, PA 15213	Federated Investors	12/15/97	1,388.88
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: President-Multitrust Systems AGGREGATE YEAR-TO-DATE: \$ 1,000.00		
John E. Fisher 6949 Roadwood Street Pittsburgh, PA 15208	Federated Investors	12/15/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Executive AGGREGATE YEAR-TO-DATE: \$ 1,000.00		
David M. Taylor 353 Wagonwheel Tr Westford, PA 15090	Federated Investors	12/15/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Ex. Vice President AGGREGATE YEAR-TO-DATE: \$ 1,000.00		
Thomas J. Donnelly 450 Smithfield St #1810 Pittsburgh, PA 15222-9907	Hogston, Donnelly & Meek	12/15/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Attorney-Partner AGGREGATE YEAR-TO-DATE: \$ 1,000.00		
James P. Gietz 3 Lamurrelle Lane Pittsburgh, PA 15216	Federated Securities Corp.	12/15/97	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 (If Form 1041 or 1042 is required)			
TOTAL (This total must agree with the total on Form 1041 or 1042)			

SCHEDULE A

ITEMIZED RECEIPTS

Fig information required for each receipt is provided. Receipts are to be used for any source for the purpose of vehicle contribution or for educational purposes. Receipts are to be used for any other purpose as indicated in the instructions to the form.

NAME OF COMMITTEE or ORG
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
John E. Connelly 2160 Noblestown Road Pittsburgh, PA 15205	Gateway Clipper Fleet	12/15/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: FED		
	Approximate Yearly Salary: \$ 1,000.00		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Charles E. Evans 5808 Myrmawfield Avenue Pittsburgh, PA 15217	NAME OF EMPLOYER Evans, Purbury & Quinn	DATE (MONTH, DAY, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Attorney		
	Approximate Yearly Salary: \$ 1,000.00		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Marvin Kanitz 4415 Fifth Avenue Pittsburgh, PA 15213	NAME OF EMPLOYER Self-Employed	DATE (MONTH, DAY, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD 500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Attorney		
	Approximate Yearly Salary: \$ 500.00		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Michael Berger 134 W. Lyndhurst Drive Pittsburgh, PA 15206	NAME OF EMPLOYER Self Employed	DATE (MONTH, DAY, YEAR) 12/19/97	AMOUNT OF EACH RECEIPT THIS PERIOD 500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Realtor		
	Approximate Yearly Salary: \$ 500.00		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Charles A. Cost 2400 Ardmore Blvd Pittsburgh PA 15221	NAME OF EMPLOYER Cost Construction	DATE (MONTH, DAY, YEAR) 12/18/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Owner		
	Approximate Yearly Salary: \$ 1,000.00		
F. FULL NAME, MAILING ADDRESS AND ZIP CODE Paul Kosman 11 Parkway Center #300 Pittsburgh, PA 15220	NAME OF EMPLOYER Kosman Development Co.	DATE (MONTH, DAY, YEAR) 12/26/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: OWNER		
	Approximate Yearly Salary: \$ 1,000.00		
G. FULL NAME, MAILING ADDRESS AND ZIP CODE Enigun Comulppi 234 Conover Road Pittsburgh, PA 15208	NAME OF EMPLOYER Companetics Corp.	DATE (MONTH, DAY, YEAR) 12/29/97	AMOUNT OF EACH RECEIPT THIS PERIOD 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: President		
	Approximate Yearly Salary: \$ 1,000.00		
SUBTOTAL (Do Not Check This Page Unless Required)			
TOTAL (Do Not Check This Page Unless Required)			

Any donation reported here must be made and substantiated by the donor for the purpose of the various election contribution or for connected purposes other than being an elected and official of any political committee or of a candidate for election to office.

NAME OF COMMITTEE (if any)
COMMITTEE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
Timothy E Parks 232 Merion Drive Pittsburgh, PA 15228-2349	Pittsburgh Regional Alliance	12/20/97	333.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: President & CEO		
	Amount This Period: 333.00		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Raymond K. Christman 1877 Shrew Avenue Pittsburgh, PA 15217	NAME OF EMPLOYER Pittsburgh Hi Tech Council	DATE (MONTH, DAY, YEAR) 12/29/97	AMOUNT OF EACH RECEIPT THIS PERIOD 334.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: President & CEO		
	Amount This Period: 334.00		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE James Collier 125 Ruschwald Lane Pittsburgh, PA 15206	NAME OF EMPLOYER Veribac Fund	DATE (MONTH, DAY, YEAR) 12/29/97	AMOUNT OF EACH RECEIPT THIS PERIOD 333.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: CEO		
	Amount This Period: 333.00		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Barbara Roggenbuhl 13300 Shaker Blvd., Suite 1102 Cleveland, OH 44120	NAME OF EMPLOYER Center for Families & Children	DATE (MONTH, DAY, YEAR) 12/15/97	AMOUNT OF EACH RECEIPT THIS PERIOD (In-kind Contribution) 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: Development Director		
	Amount This Period: 1,000.00 (In-kind-contribution)		
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		
	Amount This Period: 0		
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		
	Amount This Period: 0		
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		
	Amount This Period: 0		
SUBTOTAL (do not include page totals)			
TOTAL (do not include page totals)			48,050.00

SCHEDULE A

ITEMIZED RECEIPTS

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)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
NRLCA PAC 1630 Duke Street, 4th Floor Alexandria, VA 22314-3166		7/15/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A		
	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
Labourer's Political League 905 16th Street N.W. Washington, DC 20006		7/22/97	2,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A		
	Aggregate Year-to-Date: \$ 2,000.00		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
Bricklayers & Allied Craftsmen P.A.C. 815 15th Street N.W. Washington, DC 20005		7/24/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A		
	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
Bookmakers-Blacksmiths L.E.A.P. Program 2722 Merrilee Drive #360 Fairfax, VA 22031		7/24/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A		
	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
Paine Wehner Fund For Better Govt. 1285 Avenue of Americas, 14th floor New York, NY 10019		7/14/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A		
	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
FBI Lily and Company P.A.C. 555 11th Street NW Suite 65D Washington, DC 20004		8/14/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A		
	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
Bayer Corporation Biotech Bayer Road Pittsburgh, PA 15205		8/14/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A		
	Aggregate Year-to-Date: \$ 500.00		
SUBTOTAL (if Receipts for Page 1 only):			
TOTAL This Period (ac page 11b line number only):			

SCHEDULE A

ITEMIZED RECEIPTS

The amount shown for each receipt is the amount shown on the receipt.

PAGE 2

OF 7

FOR LINE NUMBER 11 (G)

Any information reported here that is required by the Internal Revenue Service may be subject to audit by the Service for the purpose of determining the proper amount of tax to be assessed, and the Service may, in the exercise of its authority, examine and audit the records of any individual or entity to which such information has been furnished.

NAME OF COMMITTEE (or) DONOR
COVINE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
Lockheed Martin Employees P.A.C. 1725 Jefferson Davis Hwy. Crystal Square Two #300 Arlingtoe, VA 22202		8/14/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A Aggregate This Period: \$ 500.00		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE National Maritime Union P.L.O.W. 1125 15th Street N.W. #501 Washington, DC 20005	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
	N/A	8/14/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A Aggregate This Period: \$ 500.00		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE International Brotherhood of Painters and Allied Trades (IBPAT) 1750 New York Avenue, NW Washington, DC 20006	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
	N/A	8/14/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A Aggregate This Period: \$ 2,000.00		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Philip Morris Companies Inc. P.A.C. 120 Park Avenue New York, NY 10017	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
	N/A	8/14/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A Aggregate This Period: \$ 500.00		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE PFizer PAC 235 Ego 40nd St New York, NY 10017	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
	N/A	8/21/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A Aggregate This Period: \$ 500.00		
F. FULL NAME, MAILING ADDRESS AND ZIP CODE American Nurses Assn. P.A.C. 800 Maryland Avenue SW Suite 100 West Washington, DC 20024-2571	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
	N/A	8/21/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A Aggregate This Period: \$ 500.00		
G. FULL NAME, MAILING ADDRESS AND ZIP CODE Seafarers Political Activity 5201 Audi Way Camp Springs, MD 20746	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
	N/A	8/10/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A Aggregate This Period: \$ 500.00		
SUBTOTAL of receipts (see optional page 1).....			
TOTAL: This total (see page 1) for a total of \$.....			

Any information required on this Report and Schedule may not be filed or used by any person for the purpose of evading or circumventing any Federal, State, or local law, or any Federal, State, or local regulation.

NAME OF COMMITTEE (print)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
Johnson & Johnson Employees Good Govt. Fund One Johnson & Johnson Plaza New Brunswick, NJ 08933	N/A	9/24/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		OCCUPATION: N/A	
Aggregate This-Date: \$ 1,000.00			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Amalgamated Transit Union COPE 5023 Wisconsin Avenue, N.W. Washington, DC 20016	N/A	9/24/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		OCCUPATION: N/A	
Aggregate This-Date: \$ 1,000.00			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Smilking Republican PAC One Franklin Plaza, P.O. Box 7929 Philadelphia, PA 19101	N/A	9/24/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		OCCUPATION: N/A	
Aggregate This-Date: \$ 500.00			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE National League of Postmasters P.A.C. 1023 N Royal Street Alexandria, VA 22314	N/A	10/2/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		OCCUPATION: N/A	
Aggregate This-Date: \$ 500.00			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Milk Marketing, Inc. P.A.C. 8257 New Circle Strongsville, OH 44136	N/A	10/2/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		OCCUPATION: N/A	
Aggregate This-Date: \$ 500.00			
F. FULL NAME, MAILING ADDRESS AND ZIP CODE Bristol-Myers Squibb Co. Employee P.A.C. 345 Park Avenue New York, NY 10154	N/A	10/2/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		OCCUPATION: N/A	
Aggregate This-Date: \$ 500.00			
G. FULL NAME, MAILING ADDRESS AND ZIP CODE NPS/PAC 33 Glenlake Parkway, N.E. Atlanta, GA 30328	N/A	10/15/97	4,500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		OCCUPATION: N/A	
Aggregate This-Date: \$ 4,500.00			
SUBTOTAL of Receipts this Page (include all receipts from all pages):			
TOTAL (This total does not include the amount of any other receipts from other pages):			

Any information reported here with respect to a donation payable to and received by any person for the purpose of deferring receipt of or for charitable purposes, other than using the name and address of any political committee to which contributions from such person are

NAME OF COMMITTEE (line 1)
COVNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
P. FULL NAME, MAILING ADDRESS AND ZIP CODE Preston, Gates, Ellis and Rouvelas Meeds P.A.C. 1735 New York Avenue, NW #200 Washington, DC 20006		10/23/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A Aggregate Year-to-Date: \$ 500.00		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE National Assn of Letter Carriers C.O.P.E. 100 Indiana Avenue NW Washington, DC 20001		10/28/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A Aggregate Year-to-Date: \$ 1,000.00		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Packer/Harter, Inc. Committee for Effective Govt. 115X Tower Pittsburgh, PA 15219		12/0/97	600.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A Aggregate Year-to-Date: \$ 600.00		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Kirkpatrick and Lockhart, LLP Political Action Committee 533 Southfield Street, Room 1500 Pittsburgh, PA 15222		12/9/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A Aggregate Year-to-Date: \$ 1,000.00		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Credit Union Legislative Action Council Credit Union National Assn 805 15th Street, NW #300 Washington, DC 20005-2207		12/9/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A Aggregate Year-to-Date: \$ 1,000.00		
F. FULL NAME, MAILING ADDRESS AND ZIP CODE American Institute of CPA's Effective Legislation Committee 1455 Pennsylvania Avenue, NW Washington, DC 20004-1007		12-9/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A Aggregate Year-to-Date: \$ 1,000.00		
G. FULL NAME, MAILING ADDRESS AND ZIP CODE ABB Dolner-Benz Transportation LSA Employees Pol. Fund 1501 Lebanon Church Road Pittsburgh, PA 15206-1491		12/9/97	2,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A Aggregate Year-to-Date: \$ 2,000.00		
SUBTOTAL (if receipt not page optional).....			
TOTAL (this total list page(s) for number(s).....			

SCHEDULE A

ITEMIZED RECEIPTS

Use this area to indicate the source of the contribution or the recipient's name and address of any political committee to which the contribution was made.

PAGE 5

OF 7

FOR LINE NUMBER 11 (e)

Any information reported here with respect to a contribution received by or made by any person for the purpose of affecting a nomination or for a political purpose, which does not bear the name and address of any political committee to which the contribution was made, is subject to the provisions of the Internal Revenue Code.

NAME OF COMMITTEE (line 0)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERSON
Pennsylvania Credit Union League Legislative Action Committee 4309 N. Front Street Harrisburg, PA 17110		12/10/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCASION: N/A Aggregate Year-to-Date: \$ 1,000.00		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Pharmacia & Upjohn Legislative Support Exchange 7000 Forage Road Kalamazoo, MI 49001		12/11/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCASION: N/A Aggregate Year-to-Date: \$ 500.00		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Duquesne Light Company FEDUPAC One Oxford Center 17-4 30E Grand Street Pittsburgh, PA 15279		12/11/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCASION: N/A Aggregate Year-to-Date: \$ 1,000.00		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Dollar (Dollar Bank) Three Gateway Center, 9 North Pittsburgh, PA 15222		12/11/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCASION: N/A Aggregate Year-to-Date: \$ 1,000.00		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE PNC Bank PAC 2 PNC Plaza Pittsburgh, PA 15222-2719		12/15/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCASION: N/A Aggregate Year-to-Date: \$ 1,000.00		
F. FULL NAME, MAILING ADDRESS AND ZIP CODE Nebisco, Inc. NAHPAC 7 Campus Drive Parsippany, NJ 07054		12/15/97	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCASION: N/A Aggregate Year-to-Date: \$ 500.00		
G. FULL NAME, MAILING ADDRESS AND ZIP CODE Fraternal Services Political Committee c/o J. Christopher Donahue 1001 Liberty Avenue Pittsburgh, PA 15222-3715		12/15/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCASION: N/A Aggregate Year-to-Date: \$ 1,000.00		
SUBTOTAL (if Sample 11a Page 1 only)			
TOTAL (This total includes this line number only)			

Any contribution from such a person is deemed to be made by any person for the purpose of making such a contribution to a political party, office, or campaign, unless the donor is a political committee or other institution covered by section 501(c)(3).

NAME OF CONTRIBUTOR : **COYNE FOR CONGRESS COMMITTEE**

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
National Assn of Life Underwriters P.A.C. 1922 K Street N.W. Washington, DC 20006		12/15/97	2,500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A		
	Aggregate This Period: \$ 2,500.00		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
Friends of Sophie Masloff P.O. Box 2437 Pittsburgh, PA 15230		12/19/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A		
	Aggregate This Period: \$ 1,000.00		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
Westinghouse Employees Political Participation Program 1801 K Street, NW Washington, DC 20006		12/23/97	2,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A		
	Aggregate This Period: \$ 2,000.00		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
National Treasury Employees Union 901 E Street N.W. Suite 600 Washington, DC 20004-2037		12/23/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A		
	Aggregate This Period: \$ 1,000.00		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
Band PAC 1445 New York Avenue NW Washington, DC 20005-2156		12/28/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A		
	Aggregate This Period: \$ 1,000.00		
F. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
Buchanan-Jaggers P.C. Committee For Effective Government 11 Qafani Center 20th Floor 301 Grand Street Pittsburgh, PA 15219-1410		12/29/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A		
	Aggregate This Period: \$ 1,000.00		
G. FULL NAME, MAILING ADDRESS AND ZIP CODE	NAME OF EMPLOYER	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
Consol Coal Group PAC 1800 Washington Road Pittsburgh, PA 15241		12/29/97	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	OCCUPATION: N/A		
	Aggregate This Period: \$ 1,000.00		
ELECTORAL or LEGISLATIVE (Section 501(c)(7))			
TOTAL This Period (do not include this amount)			

Any information required from this and Reports and accompanying schedules or any by any person shall be prepared and submitted to the appropriate person after the filing of the return and after the filing of the return of the donor of the credit of primary tax. Such information from such schedules.

NAME OF COMMITTEE (or any OFFICE FOR CONGRESS COMMITTEE)

A. FULL NAME, MAILING ADDRESS AND ZIP CODE (I.E.W. C.O.P.E.
1125 15th Street, N.W.
Washington, DC 20005

Name of Donor:

DATE (MONTH, DAY, YEAR)

AMOUNT OF EACH RECEIPT PER PERIOD

11/30/97

1,000.00

Receipt for: Primary General Other (specify):

OCCUPATION: N/A

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 PER PERIOD

Receipt for: Primary General 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 PER PERIOD

Receipt for: Primary General 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 PER PERIOD

Receipt for: Primary General 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 PER PERIOD

Receipt for: Primary General 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 PER PERIOD

Receipt for: Primary General 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 PER PERIOD

Receipt for: Primary General Other (specify):

OCCUPATION:

Aggregate Year-to-Date: \$

SUBTOTAL (The total line amounts for earlier rows)

TOTAL (The total line amounts for earlier rows)

43,100.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
Renaissance Publications 1516 Fifth Avenue Pittsburgh, PA 15219	Business Directory Ad DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/01/97	200.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Brookline Breeze c/o Michael Radley 1757 Scaton Street Pittsburgh, PA 15226	Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/01/97	50.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Cuntrell/Cutter Printing 1789 Olive Street Capital Hts, MD. 20743	Printing DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/01/97	1,202.25
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Postmaster, Pittsburgh Pittsburgh, PA 15222	Stamps DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/15/97	64.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Concerned Citizens of Greater Pgh. P.O. Box 7514 Pittsburgh, PA 15213	Awards Banquet tickets DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/25/96	300.00
F. FULL NAME, MAILING ADDRESS AND ZIP CODE Fraioi, Inc. 80 F Street Washington, D.C. 20001	Consulting Services DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/15/97	2,516.18
G. FULL NAME, MAILING ADDRESS AND ZIP CODE Breachmenders 200 Robinson Street Pittsburgh, PA 15213	Program Ad DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/15/97	25.00
H. FULL NAME, MAILING ADDRESS AND ZIP CODE Pittsburgh Irish Festival P.O. Box 81173 Pittsburgh, PA 15217	Program Ad DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/15/97	25.00
I. FULL NAME, MAILING ADDRESS AND ZIP CODE Greenfield Baseball Assn. c/o Ron Lerace 927 Norfolk Street Pittsburgh, PA 15217	Program Ad DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/15/97	25.00
SUBTOTAL of Disbursements this Page (optional).....			
TOTAL This Period (last page this line number only).....			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in full)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
National Democratic Club 30 Ivy Street, S.E. Washington, D.C. 20003-4071	Banquet charges DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/15/97	304.15
National Democratic Club 30 Ivy Street, S.E. Washington, D.C. 20003-4071	Banquet charges DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/15/97	2,255.56
PNC Bank P.O. Box 15397 Wilmington, DE 19886-5397	Car rental charges - Hertz DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/21/97	53.98
Memo: Hertz Rent-A-Car Washington, D.C.	Car Rental charges DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/02/97	(53.98)
Pittsburgh Federal Executive Board 406 Federal Building Pittsburgh, PA 15222	Donation-Fed. Women's program DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/21/97	50.00
Hill District Civic Assn. c/o Bea Mahaffey 3534 Camp Street Pittsburgh, PA 15219	Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/24/97	100.00
Just Harvest 120 E. 9th Avenue Homestead, PA 15120	Program Ad DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/97	40.00
Brighton Hts. Athletic Assn. c/o Ms. Terry Valentine 120 Frankford Avenue Pittsburgh, PA 15229	Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/97	25.00
Rainbow Kitchen Community Services c/o Howard J. Turner, Jr., 341 Fourth Avenue Pittsburgh, PA 15222	Program Ad DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/97	25.00
SUBTOTAL of Disbursements this Page (optional).....			
TOTAL This Period (last page this line number only).....			

SCHEDULE D

ITEMIZED DISBURSEMENTS

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 (to run)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
Barnes & Nobles Books Smithfield Street Pittsburgh, PA 15222	Door Prize-PA Assn. of Women DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/97	28.84
Kaufmanns Department Store Fifth Avenue Pittsburgh, PA 15219	Gift Certificate/Door Prize DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/97	25.00
Central Catholic HS. 4720 Fifth Avenue Pittsburgh, PA 15213	Program AD DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/7/97	245.00
Fraioli, Inc 80 F St, NW #804 Washington, DC 20001	Expenses DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/14/97	90.03
West End-Elliott meals-on-wheels c/o Ed Lysakowski 24 Marteca Place Pittsburgh, PA 15205	Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/14/97	25.00
UAW Region 2 Outing C/O Art Rush UAW Region 2 5000 Rockside Road, #300 Cleveland, OH 44131	Tickets DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/14/97	100.00
Uptown Community Action Group Forbes-Stevenson Bldg 1401 Forbes Ave #224, Pittsburgh, PA 15219	Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/14/97	25.00
East North Side Action c/o Pam Minton 616 Suismon Street, Pittsburgh, PA 15212	Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/14/97	25.00
Greenfield Football and Cheerleading Organization 430 Greenfield Ave., Pittsburgh, PA 15207	Program AD DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/14/97	25.00

SUBTOTAL of Disbursements this Page
 (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4

OF 11

FOR LINE NUMBER 17

Any information copied from such Reports and Statements may not be 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 sources.

NAME OF COMMITTEE (in full)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
Frank, Bails, Kirk, Mureko & Toal 33rd floor, Gulf Tower Pittsburgh, PA 15219	Postage etc... DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/21/97	15.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Shadyside Action Coalition P.O. Box 10149 Pittsburgh, PA 15232	PURPOSE OF DISBURSEMENTS Program AD DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/21/97	85.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Italian Heritage Society of America 6 Turner Drive Pittsburgh, PA 15236	PURPOSE OF DISBURSEMENTS Program AD DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/5/97	50.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Arlington Civic Council 2201 Salisbury Street Pittsburgh, PA 15210	PURPOSE OF DISBURSEMENTS Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/5/97	25.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Irish Centre of Pittsburgh Fels P.O. Box 8148 Pittsburgh, PA 15217	PURPOSE OF DISBURSEMENTS Program AD DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/5/97	30.00
F. FULL NAME, MAILING ADDRESS AND ZIP CODE Seton-Lasalle Hockey Club c/o Jack Snyder 214 Carriage Lane Pittsburgh, PA 15241	PURPOSE OF DISBURSEMENTS Program AD DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/10/97	50.00
G. FULL NAME, MAILING ADDRESS AND ZIP CODE Frajoli 80 F St, NW #804 Washington, DC 20001	PURPOSE OF DISBURSEMENTS Services DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/10/97	9.97
H. FULL NAME, MAILING ADDRESS AND ZIP CODE League of Ukrainian Catholics Convention c/o Nickolas C. Kotow 6390 Churchill Road Bethel Park, PA 15102	PURPOSE OF DISBURSEMENTS Program AD DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/15/97	25.00
I. FULL NAME, MAILING ADDRESS AND ZIP CODE Lawrenceville-Bloomfield Meals-on-Wheels c/o Lena Hotjcc 4916 Hatfield Street, Pittsburgh, PA 15201	PURPOSE OF DISBURSEMENTS Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/15/97	25.00

SUBTOTAL of Disbursements this Page
(optional).....

TOTAL This Period (but page this line number only).....

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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)
 COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
PNC Bank P.O. Box 15397 Wilmington, DE 19886-5397	Credit Card annual fee DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/97	40.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Frank, Bails, Kirk, Murcko & Toal 33rd floor, Gulf Tower Pittsburgh, PA 15219	PURPOSE OF DISBURSEMENTS Postage etc. DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/97	3.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Pensioners Association, Homestead c/o Gene McGlynn Bishop Boyle Center 120 East Ninth Avenue Homestead, PA 15120	PURPOSE OF DISBURSEMENTS Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/97	15.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Jewish Sports Hall of Fame Irene Kaufmann Bldg 5738 Forbes Avenue Pittsburgh, PA 15217	PURPOSE OF DISBURSEMENTS Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/97	75.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Pittsburgh Columbus Day Parade 5415 Beacon Street Pittsburgh, PA 15217	PURPOSE OF DISBURSEMENTS Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/97	100.00
F. FULL NAME, MAILING ADDRESS AND ZIP CODE Federation of War Vets Societies c/o Tony Filardi 2124 Parklyn Street, Pittsburgh, PA 15234	PURPOSE OF DISBURSEMENTS Parade Trophy DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/97	25.00
G. FULL NAME, MAILING ADDRESS AND ZIP CODE Federation of War Vets Societies c/o Ralph Diluigi 1813 S Canal Street, Sharpsburg, PA 15215	PURPOSE OF DISBURSEMENTS Program AD DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/97	20.00
H. FULL NAME, MAILING ADDRESS AND ZIP CODE Fraioli 80 F St, NW #804 Washington, DC 20001	PURPOSE OF DISBURSEMENTS Services DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/2/97	26.35
I. FULL NAME, MAILING ADDRESS AND ZIP CODE East Allegheny Community Council Hollander Building 415 E Ohio St #225, Pittsburgh, PA 15212	PURPOSE OF DISBURSEMENTS Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/2/97	25.00
SUBTOTAL of Disbursements this Page (optional).....			
TOTAL This Period (last page this line omitted) only.....			

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (or fund)
 COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
Eastside Alliance 4806 Liberty Avenue Pittsburgh, PA 15224	Program AD DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/2/97	50.00
The Jewish Chronicle 5600 Baum Blvd Pittsburgh, PA 15206	Holiday Greeting AD DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/2/97	139.20
East Northside Action Committee Assn 616 Suismon Street Pittsburgh, PA 15212	Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/97	25.00
St John of God Parish 810 Chartiers Avenue McKees Rocks, PA 15136	Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/97	50.00
Frank, Bails, Kirk, Mureko & Toal 33rd floor, Gulf Tower Pittsburgh, PA 15219	Postage etc. DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/97	6.00
Greenfield Organization 430 Greenfield Avenue Pittsburgh, PA 15207	Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/97	75.00
St Joseph's House of Hospitality 1635 Bedford Avenue Pittsburgh, PA 15219	Dinner Ticket DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/97	100.00
Carrick Community Council P.O. Box 5901 Pittsburgh, PA 15210	Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/97	25.00
Don Froehlich 311 Rustic Avenue Pittsburgh, PA 15210	Mt. Oliver Christmas Program DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/97	100.00
SUBTOTAL of Disbursements this Page (optional).....			
TOTAL This Period (last page this line number only).....			

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate
schedules for each
category of the
Detailed Subentry
Page

PAGE 7

OF
11

FOR LINE NUMBER
17

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NAME OF COMMITTEE (in full)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
Postmaster, Pittsburgh Pittsburgh, PA 15219	Stamps DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/97	32.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Kaufmanns Department Store Fifth Avenue Pittsburgh, PA 15219	PURPOSE OF DISBURSEMENTS Gift Certificates/Door Prizes DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/97	50.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE PCASA/Minority AIDS Working Group 5907 Penn Avenue 3rd floor Pittsburgh, PA 15206	PURPOSE OF DISBURSEMENTS Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/97	50.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE The Circle "L" Club of Pgh Post Office Box 91261 Pittsburgh, PA 15221	PURPOSE OF DISBURSEMENTS Two Dinner Ticket DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	56.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Rev. Beth Veney 2518 Wylie Avenue Pittsburgh, PA 15219	PURPOSE OF DISBURSEMENTS Anniversary AD DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/29/97	25.00
F. FULL NAME, MAILING ADDRESS AND ZIP CODE North Star Specials c/o Bea Gorman 157 Clairmont Avenue Pittsburgh, PA 15229	PURPOSE OF DISBURSEMENTS Bingo Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/7/97	50.00
G. FULL NAME, MAILING ADDRESS AND ZIP CODE Postmaster Pgh Pittsburgh, PA 15222	PURPOSE OF DISBURSEMENTS Stamps DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/14/97	96.00
H. FULL NAME, MAILING ADDRESS AND ZIP CODE Hill Community Development Corporation 2015-17 Centre Avenue Pittsburgh, PA 15219	PURPOSE OF DISBURSEMENTS Dinner Ticket DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/14/97	100.00
I. FULL NAME, MAILING ADDRESS AND ZIP CODE Franks, Bails, Kirk, Mureko & Toal 33rd floor, Gulf Tower Pittsburgh, PA 15219	PURPOSE OF DISBURSEMENTS Postage, Photocopying DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/14/97	75.00
SUBTOTAL of Disbursements this Page (optional).....			
TOTAL This Period (last page this line number only).....			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 8

OF 11

FOR LINE NUMBER 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciiting contributions or for commercial purposes, other than using the same web address of any political committee to which contributions from such committee.

NAME OF COMMITTEE (in full)

COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
The Pittsburgh Foundation-Charles Lieberth Scholarship Fund One PPG Place- 30th floor Pittsburgh, PA 15222	Dinner Ticket DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/14/97	100.00
PA American Legion Housing for Homeless Vets c/o Ron Conley 709 Hope Street Pittsburgh, PA 15220	Program AD DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/14/97	35.00
Thomas Merton Center 5125 Penn Avenue Pittsburgh, PA 15224	Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/14/97	30.00
Hill Community Development Council 2015-17 Centre Avenue Pittsburgh, PA 15219	Dinner Ticket DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/20/97	100.00
Lawrenceville Business Assn. P.O. Box 40126 Pittsburgh, PA 15201	Light-Up Night Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/26/97	100.00
Raff Printing, Inc P.O. Box 42365 2201 Mary Street Pittsburgh, PA 15203	Printing DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/26/97	100.58
Fraioli, Inc 80 F St, NW #804 Washington, DC 20001	Expenses DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/26/97	32.67
Ralph D. Jones 2500 Que St, N.W. # 0-2 Washington, DC 20007	Cards & Envelopes DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/26/97	1,064.00
Kaufmanns Department Store Fifth Avenue Pittsburgh, PA 15219	Gift Certificates DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/26/97	100.00
SUBTOTAL of Disbursements (See Page (optional).....)			
TOTAL This Period (last page this line Auditor only).....			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 9

OF 11

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in full)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
Renaissance Publications 1516 Fifth Avenue Pittsburgh, PA 15219	Light Up For Peace Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/3/97	100.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Frank, Bails, Kirk, Murcko & Toal 33rd Floor, Gulf Tower Pittsburgh, PA 15219	PURPOSE OF DISBURSEMENTS Postage, Photocopying DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/3/97	23.25
C. FULL NAME, MAILING ADDRESS AND ZIP CODE US Airways Club P.O. Box 641170 Pittsburgh, PA 15264-1170	PURPOSE OF DISBURSEMENTS Membership Dues DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/3/97	175.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE The Penn Liberty Assn. 1560 Centre City Tower 650 Smithfield Street Pittsburgh, PA 15222	PURPOSE OF DISBURSEMENTS Two Lunch Ticket DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/3/97	70.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE ACLU of Pennsylvania 237 Oakland Avenue Pittsburgh, PA 15213-9855	PURPOSE OF DISBURSEMENTS Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/3/97	50.00
F. FULL NAME, MAILING ADDRESS AND ZIP CODE Shaare Torah Sisterhood 6322 Waldron Street Pittsburgh, PA 15217	PURPOSE OF DISBURSEMENTS Program AD DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/3/97	25.00
G. FULL NAME, MAILING ADDRESS AND ZIP CODE Freedom Unlimited, Inc 2201-03 Wylie Avenue Pittsburgh, PA 15219	PURPOSE OF DISBURSEMENTS Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/03/97	50.00
H. FULL NAME, MAILING ADDRESS AND ZIP CODE Ducks Unlimited c/o Joseph M. Kulik 910 Bank Tower 307 Fourth Avenue Pittsburgh, PA 15222	PURPOSE OF DISBURSEMENTS Donation and Dinner Ticket DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/3/97	110.00
I. FULL NAME, MAILING ADDRESS AND ZIP CODE Postmaster Pgb Pittsburgh, PA 15219	PURPOSE OF DISBURSEMENTS Stamps-Christmas Card Mailing DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/05/97	864.00
SUBTOTAL of Disbursements (this Page) (optional).....			
TOTAL This Period (last page of this transfer) (total).....			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 10

OF 11

FOR LINE NUMBER 17

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 attract contributions from such contributors.

NAMES OF COMMITTEE (in full)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
J.R. Weldin 415 Wood Street Pittsburgh, PA 15222	Supplies DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/8/97	15.32
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Bernie's Photo Center 525 East Ohio Street Pittsburgh, PA 15212	PURPOSE OF DISBURSEMENTS Photo Supplies DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/97	45.36
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Petty Cash c/o Coyne for Congress 33rd Floor, Gulf Tower Pittsburgh, PA 15219	PURPOSE OF DISBURSEMENTS Replenish Petty Cash DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/97	200.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE East Northside Action Committee 616 Suismon Street Pittsburgh, PA 15212	PURPOSE OF DISBURSEMENTS Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/16/97	25.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE PNC Bank P.O. Box 15397 Wilmington, DE 19886-5397	PURPOSE OF DISBURSEMENTS Credit Card Charges DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/19/97	45.40
F. FULL NAME, MAILING ADDRESS AND ZIP CODE Mcmo: Sweet Basil Restaurant 5882 Forbes Avenue Pittsburgh, PA 15217	PURPOSE OF DISBURSEMENTS Volunteer Dinner DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/19/97	(45.40)
G. FULL NAME, MAILING ADDRESS AND ZIP CODE St. Mary's Holiday Tournament c/o John J. McGrane 4623 Carlton Street Pittsburgh, PA 15201	PURPOSE OF DISBURSEMENTS Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/19/97	25.00
H. FULL NAME, MAILING ADDRESS AND ZIP CODE St. Mary of the Mount 403 Grandview Avenue Pittsburgh, PA 15211	PURPOSE OF DISBURSEMENTS Anniversary Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/19/97	25.00
I. FULL NAME, MAILING ADDRESS AND ZIP CODE The Voice c/o Ken Sims Coloring Books P.O. Box 99636 Pittsburgh, PA 15233	PURPOSE OF DISBURSEMENTS Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/19/97	50.00
SUBTOTAL of Disbursements this Page (printed).....			
TOTAL This Period (last page this line number (printed).....			

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate
schedules for each
category of the
Detailed Summary
Page

PAGE 11

OF
11

FOR LINE NUMBER
17

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NAME OF COMMITTEE (in full)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
Barbara Rosenthal 13800 Shaker Blvd., Suite 1102 Cleveland, OH 44120	Refreshments for Reception DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/97	(In-Kind-Contribution) 1,000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Frederick N. Frank 33rd Floor, Gulf Tower Pittsburgh, PA 15219	Help for Reception DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/97	(In-Kind-Contribution) 58.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS DISBURSEMENT FOR: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS DISBURSEMENT FOR: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS DISBURSEMENT FOR: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
F. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS DISBURSEMENT FOR: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
G. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS DISBURSEMENT FOR: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
H. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS DISBURSEMENT FOR: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
I. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS DISBURSEMENT FOR: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
SUBTOTAL of Disbursements this Page (optional).....			
TOTAL This Period (last page this line number only).....			14,217.71

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (to full)			
COYNE FOR CONGRESS COMMITTEE			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE Committee to Elect Valeric McDonald 1930 Fairlawn Street Pittsburgh, PA 15221-1504	PURPOSE OF DISBURSEMENTS Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR) 7/03/97	AMOUNT OF EACH DISBURSEMENT THIS PERIOD 50.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Thomas Petrone Committee P.O. Box 8541 Pittsburgh, PA 15220	PURPOSE OF DISBURSEMENTS Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR) 7/15/97	AMOUNT OF EACH DISBURSEMENT THIS PERIOD 50.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Democratic Committee of Bellevue c/o Betty Jane Roberts 357 Glaser Avenue Bellevue, PA 15202	PURPOSE OF DISBURSEMENTS Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR) 7/15/97	AMOUNT OF EACH DISBURSEMENT THIS PERIOD 25.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Allegheny County Democratic Committee 225 Ross Street 4th floor Pittsburgh, PA 15219	PURPOSE OF DISBURSEMENTS Program Ad DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR) 7/15/97	AMOUNT OF EACH DISBURSEMENT THIS PERIOD 200.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Young Democrats of Allegheny County c/o Sam Ashbaugh 2903 Spring Garden Avenue Pittsburgh, PA 15212	PURPOSE OF DISBURSEMENTS Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR) 7/25/97	AMOUNT OF EACH DISBURSEMENT THIS PERIOD 25.00
F. FULL NAME, MAILING ADDRESS AND ZIP CODE Allegheny County Democratic Committee 225 Ross Street 4th Floor Pittsburgh, PA 15219	PURPOSE OF DISBURSEMENTS Picnic ticket DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR) 7/31/97	AMOUNT OF EACH DISBURSEMENT THIS PERIOD 13.00
G. FULL NAME, MAILING ADDRESS AND ZIP CODE Committee to Elect Mike Coyne 7048 Shannon Road Verona, PA 15147	PURPOSE OF DISBURSEMENTS Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR) 9/5/97	AMOUNT OF EACH DISBURSEMENT THIS PERIOD 50.00
H. FULL NAME, MAILING ADDRESS AND ZIP CODE Committee to Re-Elect Mike Della Vecchia 900 Oliver Bldg 535 Smithfield Street Pittsburgh, PA 15222	PURPOSE OF DISBURSEMENTS Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR) 9/5/97	AMOUNT OF EACH DISBURSEMENT THIS PERIOD 50.00
I. FULL NAME, MAILING ADDRESS AND ZIP CODE Allegheny County Democratic Committee 225 Ross Street 4th Floor Pittsburgh, PA 15219	PURPOSE OF DISBURSEMENTS Dinner ticket DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR) 9/5/97	AMOUNT OF EACH DISBURSEMENT THIS PERIOD 50.00
SUBTOTAL of Disbursements (fill Page (number)).....			
TOTAL This Period (fill page (fill line number (number)).....			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2

OF 3

FOR LINE NUMBER 21

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NAME OF COMMITTEE (in full)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
Friends of David Wecht 14 Wood Street Pittsburgh, PA 15222	Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/5/97	55.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Quaker Valley Democratic Organization 261 Skrabut Lane Sewickley, PA 15143	PURPOSE OF DISBURSEMENTS Program AD DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/5/97	25.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Friends of Dan Onorato P.O. Box 6422 Pittsburgh, PA 15212	PURPOSE OF DISBURSEMENTS Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/97	100.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Allegheny County Democratic Committee 225 Ross Street 4th Floor Pittsburgh, PA 15219	PURPOSE OF DISBURSEMENTS Dinner Tickets DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/97	2,000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Ross Township Democrats c/o Fran Wenger 98 Seville Avenue Pittsburgh, PA 15214	PURPOSE OF DISBURSEMENTS Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/97	243.00
F. FULL NAME, MAILING ADDRESS AND ZIP CODE 20th Ward Democratic Committee c/o Audrey Locke 150 Warden Street Pittsburgh, PA 15220	PURPOSE OF DISBURSEMENTS Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/2/97	100.00
G. FULL NAME, MAILING ADDRESS AND ZIP CODE Friends for Herlo P.O. Box 9002 Pittsburgh, PA 15224	PURPOSE OF DISBURSEMENTS Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/97	150.00
H. FULL NAME, MAILING ADDRESS AND ZIP CODE National Jewish Democratic Council 503 Capitol Ct #300 Washington, DC 20002	PURPOSE OF DISBURSEMENTS Two Dinner Tickets DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/97	100.00
I. FULL NAME, MAILING ADDRESS AND ZIP CODE 28th Ward Democratic Committee 1644 Cumberland Street Pittsburgh PA 15205	PURPOSE OF DISBURSEMENTS Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/97	50.00

SUBTOTAL of Disbursements this Page
(optional).....

TOTAL of this Period (See page 1 for the number only).....

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 3

OF 3

FOR LINE NUMBER 21

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NAME OF COMMITTEE (in full)
COYNE FOR CONGRESS COMMITTEE

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD
Committee to Elect Tom Flaherty P.O. Box 3293 Pittsburgh, PA 15230	Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/97	100.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Postmaster Pittsburgh Pittsburgh, PA 15219	Stamp DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/97	32.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE DelSole for Supreme Court 1203 Law and Finance Bldg Pittsburgh, PA 15219	Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/22/97	500.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE McKees Rocks Democratic Committee c/o Frank Schiralli 823 O'Donovan Street McKees Rocks, PA 15136	Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/97	100.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE 5th Ward Democratic Committee 571 Crawford Street Pittsburgh, PA 15219	Donation DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/29/97	100.00
F. FULL NAME, MAILING ADDRESS AND ZIP CODE Vitaliano For Congress 1409 Richmond Avenue Staten Island, NY 10314	Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/97	500.00
G. FULL NAME, MAILING ADDRESS AND ZIP CODE Democratic Women's Division of Allegheny County P.O. Box 23688 Pittsburgh, PA 15222	Two Luncheon Tickets DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/26/97	50.00
H. FULL NAME, MAILING ADDRESS AND ZIP CODE People For Dawida c/o Warner Center 333 Forbes Avenue Pittsburgh, PA 15222	Contribution DISBURSEMENT FOR: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/3/97	300.00
I. FULL NAME, MAILING ADDRESS AND ZIP CODE	PURPOSE OF DISBURSEMENTS DISBURSEMENT FOR: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH DISBURSEMENT THIS PERIOD

SUBTOTAL of Disbursements this Page

(optional)

TOTAL This Period (last page this line number)

only

5,018.00

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt 1-30-98
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input checked="" type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt 1-30-98
<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	
MUD	1-30-98
PREPARER	DATE PREPARED