

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

(Summary Page)

1 / 47  
07/31/2001 12 : 22

<b>1. NAME OF COMMITTEE (in full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>		<b>2. FEC IDENTIFICATION NUMBER</b> C00326991
<b>ADDRESS (number and street)</b> <input checked="" type="checkbox"/> Check if different than previously reported 2720 JORDAN ROAD 2720 JORDAN ROAD	<b>3. IS THIS REPORT AN AMENDMENT?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<b>CITY, STATE, and ZIP CODE</b> OREFIELD PA 18069-	<b>STATE / DISTRICT</b> PA / 15	

## 4. TYPE OF REPORT

- April 15 Quarterly Report
  Twelfth day report preceding Primary \_\_\_\_\_  
 (election type)  
 election on \_\_\_\_\_ in the State of \_\_\_\_\_
- July 15 Quarterly Report
  Thirtieth day report following the General Election
- October 15 Quarterly Report
 on \_\_\_\_\_ in the State of \_\_\_\_\_
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
  Termination report

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

## SUMMARY

5. Covering period	COLUMN A	COLUMN B
_____ through _____	This Period	Calendar Year-to-Date
6. Net contributions (other than loans)		
(a) Total Contributions (other than loans) (from line 11(a)) .....	212002.33	212002.33
(b) Total Contribution Refunds (from line 20(d)) .....	1250.00	1250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) .....	210752.33	210752.33
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from line 17) .....	24061.00	24061.00
(b) Total Offsets to Operating Expenditures (from line 14) .....	1918.42	1918.42
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a)) .....	22142.58	22142.58
8. Cash on Hand at Close of Reporting Period (from line 27) .....	240374.47	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**Electronically Filed by Jeffrey M. Zimskind**

Signature of Treasurer

Date

07/30/2001

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, FEG Form 3)**

Name of Committee (In Full) PAT TOOMEY FOR CONGRESS COMMITTEE	Report Covering the Period From: 01/01/2001 To: 06/30/2001	
<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-To-Date</b>
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees .....		
(i) Itemized (use Schedule A) .....	108000.00	
(ii) Unitemized .....	8532.25	
(iii) Total of contributions from individuals .....	114532.25	114532.25
(b) Political Party Committees .....	937.17	937.17
(c) Other Political Committees (such as PACs) .....	96532.91	96532.91
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	212002.33	212002.33
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate .....	0.00	0.00
(b) All Other Loans .....	0.00	0.00
(c) TOTAL LOANS (add 13(a) and (b)) .....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	1918.42	1918.42
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	1123.18	1123.18
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) .....	215043.93	215043.93
<b>II. DISBURSEMENTS</b>		
17. OPERATING EXPENDITURES .....	24061.00	24061.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate .....	50000.00	50000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) .....	50000.00	50000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	1250.00	1250.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) .....	1250.00	1250.00
21. OTHER DISBURSEMENTS .....	3125.00	3125.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) .....	78436.00	78436.00
<b>III. CASH SUMMARY</b>		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....		103766.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) .....		215043.93
25. SUBTOTAL (add Line 23 and Line 24) .....		318810.47
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) .....		78436.00
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		240374.47

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>3 / 47</b>
			FOR LINE NUMBER <b>11A1</b>

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)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Scott Allinson  1718 Pleadilly Circle  Allentown PA 18103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Tallman, Hudders & Soren- lino  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 06/08/2001	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Dana Anderson  401 Wilshire Blvd-Suite 700  Santa Monica CA 90401- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Macerich Company  <b>Occupation</b> Vice Chairman of the Board  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 06/06/2001	<b>Amount of Each Receipt this Period</b> 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> Judith Arangio  2046 Wooded Ridge Circle  Fogelsville PA 18051- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Valley Sports & Arthritis Surg  <b>Occupation</b> Nurse  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/01/2001	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Jan Amfield  1938 Saucun Lane  Bethlehem PA 18015- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> First Union  <b>Occupation</b> Executive  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 02/20/2001	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Dexter Baker  3110 Fish Hatchery Road  Allentown PA 18103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Air Products and Chemicals  <b>Occupation</b> Chairman, Executive Committee  <b>Aggregate Year-to-Date</b> > \$ 500.00	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> William Baker  2681 Redington Road  Hellertown PA 18055- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Dunderbak's  <b>Occupation</b> Owner  <b>Aggregate Year-to-Date</b> > \$ 200.00	<b>Date (month, day, year)</b> 05/03/2001	<b>Amount of Each Receipt this Period</b> 200.00
<b>Full Name, Mailing Address, and ZIP Code</b> Frank Banko  2124 Hanover Avenue  Allentown PA 18103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Banko Beverages  <b>Occupation</b> President  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>4 / 47</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		<b>FOR LINE NUMBER</b> <b>11A1</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Curtis Bameite  1112 Prospect Ave  Bethlehem PA 18018- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Bethlehem Steel Corp  <b>Occupation</b> Chairman <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/20/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Stanley Benzel  315 North 27th Street  Allentown PA 18104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Medical Imaging of the L-V  <b>Occupation</b> Radiologist <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/01/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> John Berkheimer  1883 Jury Road  Pen Argyl PA 18072- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> H A Berkheimer  <b>Occupation</b> Manager <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/20/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Bernard Berman  2830 West Gordon St  Allentown PA 18104-4863 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> N/A  <b>Occupation</b> Retired <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/20/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Malcolm Briggs  1717 Wildberry Road  Bethlehem PA 18015- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Andasa Co  <b>Occupation</b> Insurance <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 06/28/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> John Brinson  1645 Kecks Road  Breinigsville PA 18031- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> LV Racquet & Fitness  <b>Occupation</b> Executive <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/02/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Gene Buckno  2525 Livingston Street  Allentown PA 18104-2644 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Buckno, Litscky and Co  <b>Occupation</b> CPA <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Lee Butz  3533 Traxler Blvd  Allentown PA 18104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Amin H. Butz, Inc	Date (month, day, year) 04/25/2001	Amount of Each Receipt this Period 1000.00
	Occupation Developer/Builder		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Arthur Cinader  460 St. Michael's Drive #701 Santa Fe NM 87505- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self employed	Date (month, day, year) 06/14/2001	Amount of Each Receipt this Period 1000.00
	Occupation Investment Management		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Brad Cole  602 Turkey Hill Road  Stroudsburg PA 18360- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer East Coast Jets Inc	Date (month, day, year) 05/16/2001	Amount of Each Receipt this Period 1000.00
	Occupation Pilot		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Dennis Connell  715 North New St  Bethlehem PA 18018-3937 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Form Space Design	Date (month, day, year) 05/04/2001	Amount of Each Receipt this Period 225.00
	Occupation Architect		
	Aggregate Year-to-Date > \$ 225.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Hanna Cummins  1902 Woods Hollow Lane  Allentown PA 18105- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Air Products	Date (month, day, year) 04/25/2001	Amount of Each Receipt this Period 1000.00
	Occupation VP-Chemical Group		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> L. Anderson Daub  2600 N. Delaware Drive  Easton PA 18040- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Brown Daub Autos	Date (month, day, year) 04/30/2001	Amount of Each Receipt this Period 1000.00
	Occupation Owner		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> W John Daub  525 Klein Road  Easton PA 18040- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Brown Daub Automotive	Date (month, day, year) 04/20/2001	Amount of Each Receipt this Period 1000.00
	Occupation Owner		
	Aggregate Year-to-Date > \$ 1000.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>6 / 47</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Carl Davis  PO BOX 262326  Houston TX 77207-2326  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Davis-Lynch Inc  <b>Occupation</b> President  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mrs. Lois Davis  PO BOX 282328  Houston TX 77207-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> N/A  <b>Occupation</b> Homemaker  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Walter Dealtry  450 Biery Bridge Road  Bethlehem PA 18017-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Service Tire Truck Co  <b>Occupation</b> Chairman  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/16/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> John Detzi  117 Washington St  Wind Gap PA 18091-1340  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Detzi's Tavern  <b>Occupation</b> Restaurant Owner  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Edward Donley  326 N 27th Street  Allentown PA 18104-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Air Products & Chemicals  <b>Occupation</b> Retired Chairman  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Inez Dorley  326 N. 27th St  Allentown PA 18104-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Self  <b>Occupation</b> Homemaker  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Thomas Drelas  P.O. Box 367  Upper Black Eddy PA 18972-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> HypoVareinsBank  <b>Occupation</b> Investment Banker  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>7 / 47</b>
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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Duane Dunham  1730 Deer Run Road  Bethlehem PA 18015- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Bethlehem Steel	Date (month, day, year) 05/06/2001	Amount of Each Receipt this Period 1000.00
	Occupation CEO		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Linda Eberl  3488 Laurel Lane  Center Valley PA 18034- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 04/25/2001	Amount of Each Receipt this Period 1000.00
	Occupation Retired		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Joseph El-Chaar  450 Mountain Park Road  Allentown PA 18103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Hamilton Services Group	Date (month, day, year) 06/27/2001	Amount of Each Receipt this Period 1000.00
	Occupation Executive		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ann Engleson  5541 Aberdene Street  Center Valley PA 18034- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer N/A	Date (month, day, year) 06/19/2001	Amount of Each Receipt this Period 1000.00
	Occupation Homemaker		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Scott Fainor  1544 Duxbury Court  Allentown PA 18104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer First Union Bank	Date (month, day, year) 04/30/2001	Amount of Each Receipt this Period 1000.00
	Occupation Banker		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Jeffrey Feather  1654 Whiteacre Drive N  Bethlehem PA 18015- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Pentamation	Date (month, day, year) 05/09/2001	Amount of Each Receipt this Period 1000.00
	Occupation President and CEO		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Arthur Fetzer  2053 Stonestrow Road  Bethlehem PA 18015- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 04/20/2001	Amount of Each Receipt this Period 1000.00
	Occupation Physician		
	Aggregate Year-to-Date > \$ 1000.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>8 / 47</b>
			FOR LINE NUMBER <b>11A1</b>

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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Eileen Fischmann  3003 Turner St.  Allentown PA 18104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Self  <b>Occupation</b> Homemaker  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/02/2001	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Maureen Frederick  1900 Briardiff Terrace  Allentown PA 18103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> The Frederick Group  <b>Occupation</b> Real Estate Developer  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/03/2001	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Susan Gadomski  2332 Spring Valley Road  Bethlehem PA 18015- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> N/A  <b>Occupation</b> Retired  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/11/2001	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Betty Gates  840 Yorkshire Road  Bethlehem PA 18017- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Self  <b>Occupation</b> Homemaker  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/03/2001	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Gedney  4061 Lilac Road  Allentown PA 18103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Toyota Ind Lift Truck  <b>Occupation</b> General Manager  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/20/2001	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Bonnie Gillespie  2050 Fruitville Road  East Greenville PA 18041- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Bill Gillespie Electric  <b>Occupation</b> Contractor  <b>Aggregate Year-to-Date</b> > \$ 225.00	<b>Date (month, day, year)</b> 05/09/2001	<b>Amount of Each Receipt this Period</b> 225.00
<b>Full Name, Mailing Address, and ZIP Code</b> Franklin Gillespie  P.O. Box 20322  Lehigh Valley PA 18002- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Computer Aid, Inc.  <b>Occupation</b> Div Pres - New Century Communi  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			



<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>9 / 47</b>
			FOR LINE NUMBER <b>11A1</b>

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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Phyllis Grube  4910 S. 5th St.  Emmaus PA 18049-	<b>Name of Employer</b> Night Vision Equipment, Inc.  <b>Occupation</b> VP - Finance	<b>Date (month, day, year)</b> 04/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> William Grube  4910 S 5th St  Emmaus PA 18049-	<b>Name of Employer</b> Night Vision Equipment, Inc.  <b>Occupation</b> CEO/President	<b>Date (month, day, year)</b> 04/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Guzzard  118 East Montgomery Ave Unit # 3 Ardmore PA 19003-2523	<b>Name of Employer</b> Self  <b>Occupation</b> Attorney	<b>Date (month, day, year)</b> 06/01/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Norman Harpster  2004 Sunderland Dr  Bethlehem PA 18015-	<b>Name of Employer</b> Millenium Cell  <b>Occupation</b> Financier	<b>Date (month, day, year)</b> 05/01/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Hartevelde  40 East 68th St., Apt. 3B New York NY 10021-8528	<b>Name of Employer</b> Bear Stearns Co. Inc  <b>Occupation</b> Fixed Income Specialist	<b>Date (month, day, year)</b> 04/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> William Hecht  902 Hamilton  Allentown PA 18101-	<b>Name of Employer</b> PA Power and Light  <b>Occupation</b> Chairman, President and CEO	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Raymond Holland  20 West Market St  Bethlehem PA 18018-	<b>Name of Employer</b> Holiday Hair Inc.  <b>Occupation</b> Executive	<b>Date (month, day, year)</b> 06/08/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 1000.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>10 / 47</b>
Use separate schedule(s) for each category of the Detailed Summary Page			<b>FOR LINE NUMBER 11A1</b>	
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<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Leon Holt  3003 Parkway Boulevard  Allentown PA 18104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> N/A  <b>Occupation</b> Retired  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/16/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> David T. Howard  203 East Emmaus Avenue  Allentown PA 18103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> J and D Howard Builders  <b>Occupation</b> Contractor  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 06/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> John C. Howard  3858 State Road  Coopersburg PA 18036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> J and D Howard Builders  <b>Occupation</b> Contractor  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 06/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Asa Hughes  2233 Overlook Lane  Fogelsville PA 18051- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> LBandW  <b>Occupation</b> Principal  <b>Aggregate Year-to-Date</b> > \$ 200.00	<b>Date (month, day, year)</b> 06/07/2001	<b>Amount of Each Receipt this Period</b> 200.00	
<b>Full Name, Mailing Address, and ZIP Code</b> John Iannantuono  682 N Brookside Rd  Allentown PA 18106- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Indison, Inc  <b>Occupation</b> Financial Advisor  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/20/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> David Jairol  3150 Coffeetown Road  Orefield PA 18069- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Jairol Co  <b>Occupation</b> Executive  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 06/15/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Fred Jairol  3150 Coffeetown Rd.  Orefield PA 18069- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Frederick J Jairol Company  <b>Occupation</b> Land Developer  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/09/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>11 / 47</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11A1</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Mark Jajndl  1964 Dian Court  Allentown PA 18104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> American Bank of Lehigh Valley  <b>Occupation</b> President and CEO <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/08/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> George James  451 Guards Road  Greenwich CT 06831- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Morgan Stanley Dean Witter  <b>Occupation</b> Banker <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 06/06/2001	<b>Amount of Each Receipt this Period</b> 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Evan C. Jones  2755 Carole Lane  Allentown PA 18104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> St. Luke's Hospital  <b>Occupation</b> Senior V.P. Finance <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 06/08/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> John Paul Jones  220 N. Main Street  Allentown PA 18104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Air Products & Chemicals  <b>Occupation</b> Chief Executive <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/16/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Jones  2475 Jones Road  Bath PA 18014- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> N/A  <b>Occupation</b> Retired <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/03/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> William Kels  54 South Mountain Road  Walkill NY 12589- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> N/A  <b>Occupation</b> Retired <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/11/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Elizabeth Khan  2324 Woodland Drive  Allentown PA 18103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Self  <b>Occupation</b> Physician <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/06/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	12 / 47
					FOR LINE NUMBER 11A1
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<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Ann Marie Kincol  P.O. Box 2058, R.R. 2  Moscow PA 18444		<b>Name of Employer</b> Self employed		<b>Date (month, day, year)</b> 04/20/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Insurance Agent			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Richard Kline  1708 Whiteacre Drive  Bethlehem PA 18015		<b>Name of Employer</b> N/A		<b>Date (month, day, year)</b> 05/01/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Retired			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> James Landis  2718 Windy Hill Road  Allentown PA 18103		<b>Name of Employer</b> CSI, Inc.		<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Executive			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Alan Leahy  4720 E. Texas Road  Allentown PA 18106		<b>Name of Employer</b> Lehigh Valley Eye Center		<b>Date (month, day, year)</b> 05/03/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Eye Surgeon			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Mark Lieberman  1480 Keystone Road  Allentown PA 18103		<b>Name of Employer</b> Interspace Airport Advertising		<b>Date (month, day, year)</b> 04/16/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> V.P.			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Sandra Lovell  2630 Liberty Street  Allentown PA 18104		<b>Name of Employer</b> N/A		<b>Date (month, day, year)</b> 04/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Retired			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Henry Lubsen  2150 Spyglass Hill  Center Valley PA 18034-9713		<b>Name of Employer</b> Atronic		<b>Date (month, day, year)</b> 06/19/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> President			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>13 / 47</b>
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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Richard Marshal  15 Birch Lane  Short Hills NJ 07078	Name of Employer Prebon, Fulton	Date (month, day, year) 04/20/2001	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Broker		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Kenneth McDonald  1658 E Brookhaven Dr  Allentown PA 18103-9872	Name of Employer Self	Date (month, day, year) 04/16/2001	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Physician		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Sara Merringer  932 Lawrence Dr  Emmaus PA 18049	Name of Employer N/A	Date (month, day, year) 06/29/2001	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> David Malony  101 Bridge St.  Catsaqua PA 18032	Name of Employer Self	Date (month, day, year) 01/27/2001	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 Oriental medicine		
	Aggregate Year-to-Date > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Madison Morgan  1000 Wedgewood Road  Bethlehem PA 18017	Name of Employer Bethlehem Steel Corp	Date (month, day, year) 05/01/2001	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Peter Morse  100 Four Falls Corporate Center  Conshohocken PA 19028	Name of Employer The Pennsylvania Fund	Date (month, day, year) 06/30/2001	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 Investor		
	Aggregate Year-to-Date > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Elvin Newhart  426 Beachside Place  Fernandina Beach FL 32034	Name of Employer Nivie Inc.	Date (month, day, year) 04/20/2001	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired		
	Aggregate Year-to-Date > \$ 1000.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	14 / 47
					FOR LINE NUMBER 11A1
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<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> James O Hara  1960 Little John Lane Suite 340 Allentown PA 18103-		<b>Name of Employer</b> Flanigan OHara Gentry Ass- oc		<b>Date (month, day, year)</b> 05/01/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Insurance Broker			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Paul Oberbeck  501 Apollo Drive  Bethlehem PA 18017-		<b>Name of Employer</b> National Magnetics Group		<b>Date (month, day, year)</b> 05/09/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Executive			
		<b>Aggregate Year-to-Date</b> > \$ 850.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Ken Palumbo  8457 Radhaven Street  Fogelsville PA 18051-1932		<b>Name of Employer</b> Rodale Press		<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Art Director			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Gary Perin  151 Cross Creek Ct  Bethlehem PA 18017-3787		<b>Name of Employer</b> Grand Central Sanitation		<b>Date (month, day, year)</b> 04/16/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Executive			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Donna Pittman  272 Hoover Avenue  Northampton PA 18067-		<b>Name of Employer</b> John Pittman Photography		<b>Date (month, day, year)</b> 06/28/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Photographer			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Mark Ploucha  4609 Fir Drive  Nazareth PA 18064-9821		<b>Name of Employer</b> Mack Printing Group		<b>Date (month, day, year)</b> 05/01/2001	<b>Amount of Each Receipt this Period</b> 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Printer - V.P. Operations			
		<b>Aggregate Year-to-Date</b> > \$ 200.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Richard Reppat  1958 Maltis Street  Hellertown PA 18055-2812		<b>Name of Employer</b> R L Reppat Co		<b>Date (month, day, year)</b> 05/09/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Contractor			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>15 / 47</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11A1</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Luther Rhodes  1210 S Cedar Crest Blvd Suite 2700 Allentown PA 18103-	<b>Name of Employer</b> Lehigh Valley Hospital  <b>Occupation</b> Physician - Infectious Disease	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 200.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 200.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Lelizia Riether  1658 Wildberry Road  Bethlehem PA 18015-	<b>Name of Employer</b> Self  <b>Occupation</b> Homemaker	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Stuart Rogers  1805 Sherwood Road  Allentown PA 18103-	<b>Name of Employer</b> ICORE, INC.  <b>Occupation</b> Executive	<b>Date (month, day, year)</b> 05/03/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> David Ronca  276 E Macada Road  Bethlehem PA 18017-2524	<b>Name of Employer</b> Michael Ronca and Sons  <b>Occupation</b> Contractor	<b>Date (month, day, year)</b> 06/28/2001	<b>Amount of Each Receipt this Period</b> 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Michael Ronca  1295 Seifert Road  Nazareth PA 18064-5407	<b>Name of Employer</b> Michael Ronca & Sons  <b>Occupation</b> Contractor	<b>Date (month, day, year)</b> 06/28/2001	<b>Amount of Each Receipt this Period</b> 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Michele Ronca  P.O Box 261  Bath PA 18014-	<b>Name of Employer</b> Self  <b>Occupation</b> Homemaker	<b>Date (month, day, year)</b> 06/28/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Arthur Rothkopf  515 College Ave  Easton PA 18042-	<b>Name of Employer</b> Lafayette College  <b>Occupation</b> President	<b>Date (month, day, year)</b> 05/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>16 / 47</b>
			FOR LINE NUMBER <b>11A1</b>

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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Anthony Salvaggio  1432 Cedarwood Rd.  Allentown PA 18104- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Computer AID Inc	Date (month, day, year) 04/25/2001	Amount of Each Receipt this Period 1000.00
	Occupation President	Aggregate Year-to-Date > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Samuel Saxton  1700 Airport Road  Allentown PA 18103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Cedar Hill Memorial Cemetery	Date (month, day, year) 04/16/2001	Amount of Each Receipt this Period 1000.00
	Occupation Businessman	Aggregate Year-to-Date > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Joseph Scheller  2278 Bobby Court  Orefield PA 18069- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer N/A	Date (month, day, year) 06/27/2001	Amount of Each Receipt this Period 1000.00
	Occupation Retired	Aggregate Year-to-Date > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Neil Scott  205 Davey Avenue  Pen Argyl PA 18072- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Scolty's Fashions	Date (month, day, year) 05/16/2001	Amount of Each Receipt this Period 1000.00
	Occupation President	Aggregate Year-to-Date > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> James Seitzinger  1386 Oak Drive  Macungie PA 18062- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sacred Heart Hospital	Date (month, day, year) 04/30/2001	Amount of Each Receipt this Period 1000.00
	Occupation President & CEO	Aggregate Year-to-Date > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Patricia Sherman  2214 Nottingham Road  Allentown PA 18103-3753 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 05/03/2001	Amount of Each Receipt this Period 1000.00
	Occupation Community Participant	Aggregate Year-to-Date > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Charles Snelling  1280 Church Street  Fogelsville PA 18051- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 05/01/2001	Amount of Each Receipt this Period 1000.00
	Occupation Venture Capital and Developer	Aggregate Year-to-Date > \$ 1000.00	

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....



<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>17 / 47</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11A1</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Kim Snyder  4982 St. Josephs Road  Coopersburg PA 18036-	<b>Name of Employer</b> Eastern Industries	<b>Date (month, day, year)</b> 04/20/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Manager	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> John Soler  2363 Woodland Drive  Allentown PA 18103-	<b>Name of Employer</b> Micro Matic Inc	<b>Date (month, day, year)</b> 04/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Loran Steehle  1754 Penn Crossing  Allentown PA 18104-	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Homemaker	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> William Stracale  1885 Nottingham Road  Allentown PA 18103-	<b>Name of Employer</b> Electro-Space Fab, Inc.	<b>Date (month, day, year)</b> 04/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Retired CEO	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Charles Strong  R.R. 7, Box 7373 Mountainview Drive Stroudsburg PA 18360-	<b>Name of Employer</b> East Coast Jets Inc	<b>Date (month, day, year)</b> 05/16/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Pilot	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Elliot Sussman  2210 Lehigh Parkway N  Allentown PA 18103-	<b>Name of Employer</b> Lehigh Valley Hospital	<b>Date (month, day, year)</b> 04/20/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> President & Chief Executive	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Teufel  1 Stokes Drive  Emmaus PA 18049-	<b>Name of Employer</b> Rodale Press Inc	<b>Date (month, day, year)</b> 04/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> President and COO	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>18 / 47</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		<b>FOR LINE NUMBER 11A1</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> George Tomblar  1350 Industrial Drive  Easton PA 18042-6931  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Morning Call  <b>Occupation</b> Driver  <b>Aggregate Year-to-Date</b> > \$ 200.00	<b>Date (month, day, year)</b> 05/16/2001	<b>Amount of Each Receipt this Period</b> 200.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Robin Turner  20 West Market St  Bethlehem PA 18018-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> 20 Minute Haircut  <b>Occupation</b> Owner  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 06/13/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Harold Wagner  1306 Prospect Ave  Bethlehem PA 18018-4917  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Air Products and Chemicals  <b>Occupation</b> CEO  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/09/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Walsh  2717 Fairview Street  Allentown PA 18104-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> WAEB  <b>Occupation</b> Radio Announcer  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 05/06/2001	<b>Amount of Each Receipt this Period</b> 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Walsh  2717 Fairview Street  Allentown PA 18104-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> WAEB  <b>Occupation</b> Radio Announcer  <b>Aggregate Year-to-Date</b> > \$ 500.00	<b>Date (month, day, year)</b> 06/04/2001	<b>Amount of Each Receipt this Period</b> 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Lester L. Weinding  1775 Broadway  New York NY 10019-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Self employed  <b>Occupation</b> Real Estate Investor  <b>Aggregate Year-to-Date</b> > \$ 500.00	<b>Date (month, day, year)</b> 06/06/2001	<b>Amount of Each Receipt this Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> David Wolf  325 Dogwood Terrace  Easton PA 18040-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Kressler Wolff and Miller  <b>Occupation</b> Vice President  <b>Aggregate Year-to-Date</b> > \$ 300.00	<b>Date (month, day, year)</b> 05/01/2001	<b>Amount of Each Receipt this Period</b> 300.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>19 / 47</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11A1</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Arthur Wright  3037 Fairfield Drive  Allentown PA 18103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Vinart Dealership  <b>Occupation</b> Auto Dealers <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Kenneth Yee  7445 Driftwood Road  Northampton PA 18067- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Self  <b>Occupation</b> Private Investor <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/02/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Richard Young  5847 Indian Creek Road  Zionsville PA 18092- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Wood Young and Co  <b>Occupation</b> Investment Advisor <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/24/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> William Young  2835 Houghton Lane  Macungie PA 18062-9506 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Self  <b>Occupation</b> Retired <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/16/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> John Yurconic  802 Bamsdale Road  Allentown PA 18103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Yurconic Agency  <b>Occupation</b> Insurance <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/20/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Richard Zahn  615 Linden Street  Bethlehem PA 18018- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Self  <b>Occupation</b> Oral Surgeon <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/16/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> David Zinzzenko  25 S. West Street Apt. 2 Allentown PA 18102- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Rodale Publications  <b>Occupation</b> Editor <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 06/22/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....			<b>106000.00</b>	

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>20 / 47</b>
			FOR LINE NUMBER <b>11B</b>

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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Name of Employer Information Requested	Date (month, day, year) 01/03/2001	Amount of Each Receipt this Period 37.11
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 37.11			
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Name of Employer Information Requested	Date (month, day, year) 02/07/2001	Amount of Each Receipt this Period 28.59
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 63.70			
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Name of Employer Information Requested	Date (month, day, year) 02/08/2001	Amount of Each Receipt this Period 23.83
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 87.63			
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Name of Employer Information Requested	Date (month, day, year) 02/27/2001	Amount of Each Receipt this Period 12.48
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 100.11			
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Name of Employer Information Requested	Date (month, day, year) 02/28/2001	Amount of Each Receipt this Period 34.18
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 134.29			
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Name of Employer Information Requested	Date (month, day, year) 03/21/2001	Amount of Each Receipt this Period 29.45
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 163.74			
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Name of Employer Information Requested	Date (month, day, year) 03/29/2001	Amount of Each Receipt this Period 14.73
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 178.47			

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>21 / 47</b>
			FOR LINE NUMBER <b>11B</b>

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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Information Requested	Date (month, day, year) 04/03/2001	Amount of Each Receipt this Period 117.81
	Occupation Information Requested		
	Aggregate Year-to-Date > \$ 258.28		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Information Requested	Date (month, day, year) 04/04/2001	Amount of Each Receipt this Period 20.10
	Occupation Information Requested		
	Aggregate Year-to-Date > \$ 316.38		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Information Requested	Date (month, day, year) 04/10/2001	Amount of Each Receipt this Period 88.00
	Occupation Information Requested		
	Aggregate Year-to-Date > \$ 414.38		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Information Requested	Date (month, day, year) 04/26/2001	Amount of Each Receipt this Period 23.56
	Occupation Information Requested		
	Aggregate Year-to-Date > \$ 437.94		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Information Requested	Date (month, day, year) 05/02/2001	Amount of Each Receipt this Period 29.45
	Occupation Information Requested		
	Aggregate Year-to-Date > \$ 467.38		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Information Requested	Date (month, day, year) 05/09/2001	Amount of Each Receipt this Period 28.18
	Occupation Information Requested		
	Aggregate Year-to-Date > \$ 495.57		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Information Requested	Date (month, day, year) 05/17/2001	Amount of Each Receipt this Period 235.61
	Occupation Information Requested		
	Aggregate Year-to-Date > \$ 729.18		

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>22 / 47</b>
			FOR LINE NUMBER <b>11B</b>

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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested	Date (month, day, year) 05/24/2001	Amount of Each Receipt this Period 18.12
	<b>Occupation</b> Information Requested		
	Aggregate Year-to-Date > \$ 747.30		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested	Date (month, day, year) 06/06/2001	Amount of Each Receipt this Period 39.27
	<b>Occupation</b> Information Requested		
	Aggregate Year-to-Date > \$ 786.57		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested	Date (month, day, year) 06/07/2001	Amount of Each Receipt this Period 21.15
	<b>Occupation</b> Information Requested		
	Aggregate Year-to-Date > \$ 807.72		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested	Date (month, day, year) 06/27/2001	Amount of Each Receipt this Period 29.45
	<b>Occupation</b> Information Requested		
	Aggregate Year-to-Date > \$ 837.17		
<b>Full Name, Mailing Address, and ZIP Code</b> Wilson Borough Republican Club 1708 Washington Blvd Easton PA 18042- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested	Date (month, day, year) 05/25/2001	Amount of Each Receipt this Period 100.00
	<b>Occupation</b> Information Requested		
	Aggregate Year-to-Date > \$ 100.00		

<b>SUBTOTALS</b> of Receipts This Page (Optional) .....	
<b>TOTALS</b> This Period (last page this line number only) .....	<b>937.17</b>

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>23 / 47</b>
			FOR LINE NUMBER <b>11C</b>

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)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> AAOB PAC  317 Massachusetts Ave N.E. Washington DC 20002- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Information Requested  Occupation Information Requested Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 05/07/2001	Amount of Each Receipt this Period 2000.00
<b>Full Name, Mailing Address, and ZIP Code</b> ABC PAC  1300 North 17th St Arlington VA 22209- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Information Requested  Occupation Information Requested Aggregate Year-to-Date > \$ 2500.00	Date (month, day, year) 04/17/2001	Amount of Each Receipt this Period 2500.00
<b>Full Name, Mailing Address, and ZIP Code</b> ABC PAC  1300 North 17th St Arlington VA 22209- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Information Requested  Occupation Information Requested Aggregate Year-to-Date > \$ 5000.00	Date (month, day, year) 06/30/2001	Amount of Each Receipt this Period 2500.00
<b>Full Name, Mailing Address, and ZIP Code</b> AFSA PAC  919 18th Street, N.W. Washington DC 20006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Information Requested  Occupation Information Requested Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 04/30/2001	Amount of Each Receipt this Period 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> AICPA PAC  1455 Pennsylvania Ave NW Washington DC 20004-1081 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Information Requested  Occupation Information Requested Aggregate Year-to-Date > \$ 1500.00	Date (month, day, year) 04/16/2001	Amount of Each Receipt this Period 1500.00
<b>Full Name, Mailing Address, and ZIP Code</b> AICPA PAC  1455 Pennsylvania Ave NW Washington DC 20004-1081 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Information Requested  Occupation Information Requested Aggregate Year-to-Date > \$ 1561.16	Date (month, day, year) 04/25/2001	Amount of Each Receipt this Period 61.16
<b>Full Name, Mailing Address, and ZIP Code</b> ANESTHESIOLOGISTS PAC  1101 Vermont Avenue NW Suite 605 Washington DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Information Requested  Occupation Information Requested Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 05/19/2001	Amount of Each Receipt this Period 1000.00
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>24 / 47</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11C</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> ANS PAC  P.O. Box 136  Washington DC 20044-0136	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 2000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > \$ 2000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> AOPA PAC  500 E Street NW Suite 250 Washington DC 20024-	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 5000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > \$ 5000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> APP PAC  2600 Virginia Ave N.W. Suite 123 Washington DC 20037-	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> ARM PAC  1155 - 21st St N.W. Suite 300 Washington DC 20036-	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 5000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > \$ 5000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Air Products PAC  P.O Box 441  Trexletown PA 18087-	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 06/25/2001	<b>Amount of Each Receipt this Period</b> 5000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > \$ 5000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Amer Life Insur PAC  1001 Pennsylvania Ave, NW  Washington DC 20004-2599	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 04/03/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> American Dental PAC  1111 - 14th Street NW Suite 1100 Washington DC 20005-	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 06/08/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				



<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	25 / 47
					FOR LINE NUMBER 11C
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> American Success PAC  1155 21st. N.W. Suite 300 Washington DC 20036-		<b>Name of Employer</b> Information Requested		<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 2500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Information Requested			
		<b>Aggregate Year-to-Date</b> > \$ 2500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Americhem PAC  1300 Wilson Boulevard  Arlington VA 22209-		<b>Name of Employer</b> Information Requested		<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Information Requested			
		<b>Aggregate Year-to-Date</b> > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Arthur Andersen PAC  1666 K Street N.W.  Washington DC 20006-		<b>Name of Employer</b> Information Requested		<b>Date (month, day, year)</b> 03/20/2001	<b>Amount of Each Receipt this Period</b> 1500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Information Requested			
		<b>Aggregate Year-to-Date</b> > \$ 1500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> BankPac  1120 Connecticut Ave NW  Washington DC 20036-		<b>Name of Employer</b> Information Requested		<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Information Requested			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> BUILD PAC  1201 15th St NW  Washington DC 20005-2800		<b>Name of Employer</b> Information Requested		<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Information Requested			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Bethlehem Steel Good Governme- nt 1725 Martin Tower  Bethlehem PA 18016-		<b>Name of Employer</b> Information Requested		<b>Date (month, day, year)</b> 05/07/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Information Requested			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> CHUBB PAC  15 Mountain View Road P.O. Box 1615 Plainfield NJ 07061-1615		<b>Name of Employer</b> Information Requested		<b>Date (month, day, year)</b> 05/16/2001	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Information Requested			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>26 / 47</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11C</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> CIGNA PAC  1650 Market St  Philadelphia PA 19192-1570  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> CIGNA PAC  1650 Market St  Philadelphia PA 19192-1570  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 2000.00	<b>Date (month, day, year)</b> 06/29/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> CME PAC  30 S. Wacker Drive  Chicago IL 60606  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 500.00	<b>Date (month, day, year)</b> 05/03/2001	<b>Amount of Each Receipt this Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Council Insurance PAC  701 Pennsylvania Ave NW Suite 750 Washington DC 20004-2608  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 500.00	<b>Date (month, day, year)</b> 05/16/2001	<b>Amount of Each Receipt this Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> AANA CRNA PAC  412 First St SE Suite 12 Washington DC 20003  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 500.00	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> CULAC PAC  605 Fifteenth St N.W., Suite 300 Washington DC 20005-2207  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 500.00	<b>Date (month, day, year)</b> 05/19/2001	<b>Amount of Each Receipt this Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> CVF PAC  104 North Carolina Ave SE  Washington DC 20003  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 471.75	<b>Date (month, day, year)</b> 04/25/2001	<b>Amount of Each Receipt this Period</b> 471.75	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>27 / 47</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11C</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Caterpillar Emp PAC  100 N.E. Adams St  Peoria IL 61620-1430  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b>  1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Congress Majority Committee  P.O. Box 203661  Battery Park VA 23304-3661  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b>  1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Countrywide PAC  155 N Laka Ave  Pasadena CA 91109  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 06/26/2001	<b>Amount of Each Receipt this Period</b>  1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Dealers Election Action PAC  8400 Westpark Dr  Mc Lean VA 22102  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1500.00	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b>  1500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> ENT PAC  One Prince Street  Alexandria VA 22314  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b>  1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> EXELON PAC  P.O. Box 805379  Chicago IL 60680-5379  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 05/03/2001	<b>Amount of Each Receipt this Period</b>  1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Erns And Young PAC  1225 Connecticut Ave. N.W.,  Washington DC 20036  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1500.00	<b>Date (month, day, year)</b> 05/04/2001	<b>Amount of Each Receipt this Period</b>  1500.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>28 / 47</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11C</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Exxon Mobil Corp PAC  5959 Las Colinas Blvd  Irving TX 75039-2298  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Financial Services Roundtable  605 15th St., NW  Washington DC 20005-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$ 500.00	<b>Date (month, day, year)</b> 03/22/2001	<b>Amount of Each Receipt this Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> GPU Power PAC  801 Pennsylvania Ave., NW Suite 310 Washington DC 20004-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$ 500.00	<b>Date (month, day, year)</b> 06/22/2001	<b>Amount of Each Receipt this Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Goldman Sachs PAC  1101 Pennsylvania Ave NW  Washington DC 20004-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$ 2500.00	<b>Date (month, day, year)</b> 05/30/2001	<b>Amount of Each Receipt this Period</b> 2500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Hershey Foods PAC  100 Crystal A Drive  Hershey PA 17033-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$ 500.00	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> House PAC  2700 Sanders Road  Prospect Heights IL 60070-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 03/29/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Independent Community Bankers PAC  One Thomas Circle NW Suite 400 Washington DC 20005-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>29 / 47</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		<b>FOR LINE NUMBER 11C</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> INSURPAC  412 First Street SE Suite 300 Washington DC 20003-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 03/22/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> KPMG PAC  P.O. Box 18254  Washington DC 20036-9998  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1500.00	<b>Date (month, day, year)</b> 06/04/2001	<b>Amount of Each Receipt this Period</b> 1500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Leadership 2002 PAC  1188 N. Fairfax Street Suite 425 Alexandria VA 22314-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 5000.00	<b>Date (month, day, year)</b> 03/22/2001	<b>Amount of Each Receipt this Period</b> 5000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> MORGAN PAC  230 Park Avenue 21st Floor New York NY 10169-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 05/23/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> MORGAN PAC  230 Park Avenue 21st Floor New York NY 10169-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 2500.00	<b>Date (month, day, year)</b> 06/22/2001	<b>Amount of Each Receipt this Period</b> 1500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Majority Leader PAC  PO Box 955  Lewisville TX 75087-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 2500.00	<b>Date (month, day, year)</b> 06/22/2001	<b>Amount of Each Receipt this Period</b> 2500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> MFA - PAC  2025 M Street NW Suite 800 Washington DC 20036-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>30 / 47</b>
Use separate schedule(s) for each category of the Detailed Summary Page				FOR LINE NUMBER 11C
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.				
<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> NACS PAC  1605 King St  Alexandria VA 22314-2792  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 06/22/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> NAIFA PAC  2901 Telestar Court  Falls Church VA 22042-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> NAMB PAC  5185 MacArthur Blvd Suite 250 Washington DC 20016-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 05/25/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> NBWA PAC  1100 S Washington St  Alexandria VA 22314-4494  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1500.00	<b>Date (month, day, year)</b> 06/28/2001	<b>Amount of Each Receipt this Period</b> 1500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> National Emergency Medicine  2121 K Street NW Suite 325 Washington DC 20037-1801  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 05/07/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> NFIB Safe Trust PAC  600 Maryland Ave SW Suite 700 Washington DC 20024-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 06/06/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> National Ventures Capital PAC  1655 N. Ft. Myer Dr. Suite 700 Arlington VA 22209-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  Aggregate Year-to-Date > \$ 2000.00	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 2000.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>31 / 47</b>
			FOR LINE NUMBER <b>11C</b>

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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> New York Stock Exchange PAC  801 Pennsylvania St NW Suite 630 Washington DC 20004-	Name of Employer Information Requested	Date (month, day, year) 06/22/2001	Amount of Each Receipt this Period 500.00
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> OPHTH PAC  1101 Vermont Avenue NW Suite 700 Washington DC 20005-3570	Name of Employer Information Requested	Date (month, day, year) 06/25/2001	Amount of Each Receipt this Period 2000.00
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 2000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Occidental Petroleum PAC  1717 Pennsylvania Ave. NW., Suite 400 Washington DC 20006-	Name of Employer Information Requested	Date (month, day, year) 06/30/2001	Amount of Each Receipt this Period 500.00
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> PA FOOD PAC  1029 Mumma Road P.O. Box 870 Camp Hill PA 17001-0870	Name of Employer Information Requested	Date (month, day, year) 01/27/2001	Amount of Each Receipt this Period 1000.00
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> PACE PAC  P.O Box 391  Ashland KY 41114-	Name of Employer Information Requested	Date (month, day, year) 06/30/2001	Amount of Each Receipt this Period 1000.00
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> PPandL PAC  Two North Ninth St  Allentown PA 18101-	Name of Employer Information Requested	Date (month, day, year) 06/30/2001	Amount of Each Receipt this Period 2500.00
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 2500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Philip Morris PAC  120 Park Avenue  New York NY 10017-	Name of Employer Information Requested	Date (month, day, year) 05/11/2001	Amount of Each Receipt this Period 1000.00
	Occupation Information Requested		
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 1000.00			

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>32 / 47</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11C</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Praxair PAC  P O Box 2858  Danbury CT 06813-2858  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$ 500.00	<b>Date (month, day, year)</b> 06/22/2001	<b>Amount of Each Receipt this Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Price Waterhouse PAC  PriceWaterhouseCoopers PAC 1900 K Street NW, Suite 900 Washington DC 20006-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$ 1500.00	<b>Date (month, day, year)</b> 03/29/2001	<b>Amount of Each Receipt this Period</b> 1500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> ROOF PAC  10255 W. Higgins Rd., No. 600  Des Plaines IL 60018-5607  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$ 500.00	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> National Restaurant Associati- on PAC  1200 Seventeenth St NW  Washington DC 20036-3087  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$ 2000.00	<b>Date (month, day, year)</b> 06/14/2001	<b>Amount of Each Receipt this Period</b> 2000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> SUN PAC  1801 Market Street  Philadelphia PA 19103-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$ 500.00	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Texas Freedom FundPAC  P.O. Box 6136  Alexandria VA 22306-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> USAA Group PAC  1455 F Street, NW., Suite 420 Washington DC 20004-1004  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$ 1000.00	<b>Date (month, day, year)</b> 05/23/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				



<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>33 / 47</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11C</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Washington Mutual PAC  1201 Third Avenue  Seattle WA 98101-	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > 5 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> GE Pac  1256 Pennsylvania Ave., NW-1100  Washington DC 20004-	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > 5 500.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				<b>96532.91</b>

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>34 / 47</b>
			FOR LINE NUMBER <b>14</b>
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.			
<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>			
<b>Full Name, Mailing Address, and ZIP Code</b> Verizon/Bel Atlantic  201 Starwtx St  Pittsburgh PA 15222-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > 5    1109.32	<b>Date (month, day, year)</b> 01/27/2001	<b>Amount of Each Receipt this Period</b>  1109.32
<b>Full Name, Mailing Address, and ZIP Code</b> WAEB - Am  1541 Alta Drive  Whitehall PA 18052-  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Information Requested  Occupation Information Requested  Aggregate Year-to-Date > 5    510.00	<b>Date (month, day, year)</b> 04/02/2001	<b>Amount of Each Receipt this Period</b>  510.00
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>1619.32</b>

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>35 / 47</b>
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER <b>15</b>	
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> First Union  506 North 19th St  Allentown PA 18104-	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 03/30/2001	<b>Amount of Each Receipt this Period</b> 89.96	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > \$ 89.96		
<b>Full Name, Mailing Address, and ZIP Code</b> First Union  506 North 19th St  Allentown PA 18104-	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 04/30/2001	<b>Amount of Each Receipt this Period</b> 44.47	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > \$ 134.43		
<b>Full Name, Mailing Address, and ZIP Code</b> First Union  506 North 19th St  Allentown PA 18104-	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 05/31/2001	<b>Amount of Each Receipt this Period</b> 256.40	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > \$ 390.83		
<b>Full Name, Mailing Address, and ZIP Code</b> First Union  506 North 19th St  Allentown PA 18104-	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 06/30/2001	<b>Amount of Each Receipt this Period</b> 319.91	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > \$ 710.74		
<b>Full Name, Mailing Address, and ZIP Code</b> First Union National Bank  702 Hamilton Mall  Allentown PA 18101-	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 01/31/2001	<b>Amount of Each Receipt this Period</b> 157.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > \$ 157.00		
<b>Full Name, Mailing Address, and ZIP Code</b> First Union National Bank  702 Hamilton Mall  Allentown PA 18101-	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 02/26/2001	<b>Amount of Each Receipt this Period</b> 128.25	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > \$ 285.25		
<b>Full Name, Mailing Address, and ZIP Code</b> Lafayette Ambassador Bank - CD Purchas 4127 Tilghman Street  Allentown PA 18104-	<b>Name of Employer</b> Information Requested	<b>Date (month, day, year)</b> 06/11/2001	<b>Amount of Each Receipt this Period</b> 129.19	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Information Requested	<b>Aggregate Year-to-Date</b> > \$ 129.19		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				<b>1123.18</b>

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>36 / 47</b>
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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Theresa Andreuci 7727 Carton Road Coopersburg PA 18036-	<b>Purpose of Disbursement</b> Operating Expenditure Reimburse for paper Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	<b>Date (month, day, year)</b> 04/12/2001	<b>Amount of Each Disbursement This Period</b> 110.21
<b>Full Name, Mailing Address, and ZIP Code</b> Theresa Andreuci 7727 Carton Road Coopersburg PA 18036-	<b>Purpose of Disbursement</b> Operating Expenditure Payroll 3/26 - 4/8 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	<b>Date (month, day, year)</b> 04/12/2001	<b>Amount of Each Disbursement This Period</b> 324.40
<b>Full Name, Mailing Address, and ZIP Code</b> Theresa Andreuci 7727 Carton Road Coopersburg PA 18036-	<b>Purpose of Disbursement</b> Operating Expenditure Reimburse for let Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	<b>Date (month, day, year)</b> 04/20/2001	<b>Amount of Each Disbursement This Period</b> 11.64
<b>Full Name, Mailing Address, and ZIP Code</b> Theresa Andreuci 7727 Carton Road Coopersburg PA 18036-	<b>Purpose of Disbursement</b> Operating Expenditure Payroll 4/8 - 4/23 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	<b>Date (month, day, year)</b> 04/20/2001	<b>Amount of Each Disbursement This Period</b> 330.20
<b>Full Name, Mailing Address, and ZIP Code</b> Theresa Andreuci 7727 Carton Road Coopersburg PA 18036-	<b>Purpose of Disbursement</b> Operating Expenditure Reimburse of posta Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	<b>Date (month, day, year)</b> 04/26/2001	<b>Amount of Each Disbursement This Period</b> 91.28
<b>Full Name, Mailing Address, and ZIP Code</b> Theresa Andreuci 7727 Carton Road Coopersburg PA 18036-	<b>Purpose of Disbursement</b> Operating Expenditure Payroll 4/24 - 5/7 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	<b>Date (month, day, year)</b> 05/04/2001	<b>Amount of Each Disbursement This Period</b> 330.20
<b>Full Name, Mailing Address, and ZIP Code</b> Theresa Andreuci 7727 Carton Road Coopersburg PA 18036-	<b>Purpose of Disbursement</b> Operating Expenditure Reimburse for name Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	<b>Date (month, day, year)</b> 05/11/2001	<b>Amount of Each Disbursement This Period</b> 30.72
<b>Full Name, Mailing Address, and ZIP Code</b> Theresa Andreuci 7727 Carton Road Coopersburg PA 18036-	<b>Purpose of Disbursement</b> Operating Expenditure Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	<b>Date (month, day, year)</b> 05/21/2001	<b>Amount of Each Disbursement This Period</b> 330.20
<b>Full Name, Mailing Address, and ZIP Code</b> Theresa Andreuci 7727 Carton Road Coopersburg PA 18036-	<b>Purpose of Disbursement</b> Operating Expenditure Reimburse for post Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	<b>Date (month, day, year)</b> 05/29/2001	<b>Amount of Each Disbursement This Period</b> 115.40

**SUBTOTALS** of Disbursements This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>37 / 47</b>
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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Theresa Andreuci 7727 Carlton Road Coopersburg PA 18036-	Purpose of Disbursement Operating Expenditure Payroll  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	Date (month, day, year) 06/04/2001	Amount of Each Disbursement This Period 330.20
<b>Full Name, Mailing Address, and ZIP Code</b> Theresa Andreuci 7727 Carlton Road Coopersburg PA 18036-	Purpose of Disbursement Operating Expenditure Payroll  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	Date (month, day, year) 06/18/2001	Amount of Each Disbursement This Period 330.20
<b>Full Name, Mailing Address, and ZIP Code</b> Aliyeh Printing 1002 Tilghman St Allentown PA 18102-	Purpose of Disbursement Operating Expenditure Letterhead & Enval  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	Date (month, day, year) 04/20/2001	Amount of Each Disbursement This Period 222.60
<b>Full Name, Mailing Address, and ZIP Code</b> Aliyeh Printing 1002 Tilghman St Allentown PA 18102-	Purpose of Disbursement Operating Expenditure Letterhead/Envelop  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	Date (month, day, year) 06/18/2001	Amount of Each Disbursement This Period 222.60
<b>Full Name, Mailing Address, and ZIP Code</b> Bulleathers 410 First St SE Washington DC 20003-	Purpose of Disbursement Operating Expenditure Fundrais- ing Expens  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	Date (month, day, year) 06/27/2001	Amount of Each Disbursement This Period 275.33
<b>Full Name, Mailing Address, and ZIP Code</b> Cash 801 Hamilton Street Allentown PA 18101-	Purpose of Disbursement Operating Expenditure DC Petty cash acco  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	Date (month, day, year) 02/01/2001	Amount of Each Disbursement This Period 275.00
<b>Full Name, Mailing Address, and ZIP Code</b> Cash 801 Hamilton Street Allentown PA 18101-	Purpose of Disbursement Operating Expenditure Petty Ca- sh for Dis  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	Date (month, day, year) 04/26/2001	Amount of Each Disbursement This Period 150.00
<b>Full Name, Mailing Address, and ZIP Code</b> City Of Allentown 435 Hamilton St Room 110 Allentown PA 18101-1699	Purpose of Disbursement Operating Expenditure 23-28954- 56 4th Qtr  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	Date (month, day, year) 01/27/2001	Amount of Each Disbursement This Period 427.40
<b>Full Name, Mailing Address, and ZIP Code</b> Cheryl Corsa 1290 Stark Road Bethlehem PA 18017-	Purpose of Disbursement Operating Expenditure Consulta- nt :stat's  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	Date (month, day, year) 02/26/2001	Amount of Each Disbursement This Period 1000.00

**SUBTOTALS** of Disbursements This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER  
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**NAME OF COMMITTEE (In Full)  
PAT TOOMEY FOR CONGRESS COMMITTEE**

<p><b>Full Name, Mailing Address, and ZIP Code</b> Internal Revenue Service  P.O. Box 8786  Philadelphia PA 19162-8786</p>	<p>Purpose of Disbursement Operating Expenditure replacement + pens  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Other</u></p>	<p>Date (month, day, year) 01/11/2001</p>	<p>Amount of Each Disbursement This Period 604.24</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> Internal Revenue Service  P.O. Box 8786  Philadelphia PA 19162-8786</p>	<p>Purpose of Disbursement Operating Expenditure VOID # 1234 lost b  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Other</u></p>	<p>Date (month, day, year) 01/11/2001</p>	<p>Amount of Each Disbursement This Period -484.00</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> Internal Revenue Service  P.O. Box 8786  Philadelphia PA 19162-8786</p>	<p>Purpose of Disbursement Operating Expenditure 1999 Income Tax  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Other</u></p>	<p>Date (month, day, year) 03/14/2001</p>	<p>Amount of Each Disbursement This Period 1255.20</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> Edwards Business Systems  P.O. Box 6798  Reading PA 19610-</p>	<p>Purpose of Disbursement Operating Expenditure Toner Cartridge Z7  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Other</u></p>	<p>Date (month, day, year) 05/04/2001</p>	<p>Amount of Each Disbursement This Period 225.48</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> First Union National Bank  702 Hamilton Mall  Allentown PA 18101-</p>	<p>Purpose of Disbursement Operating Expenditure Service charges  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Other</u></p>	<p>Date (month, day, year) 01/10/2001</p>	<p>Amount of Each Disbursement This Period 235.38</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> First Union National Bank  702 Hamilton Mall  Allentown PA 18101-</p>	<p>Purpose of Disbursement Operating Expenditure 23-28954-56 Form 94  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Other</u></p>	<p>Date (month, day, year) 01/27/2001</p>	<p>Amount of Each Disbursement This Period 154.77</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> First Union National Bank  702 Hamilton Mall  Allentown PA 18101-</p>	<p>Purpose of Disbursement Operating Expenditure 2000 1120 PDL 23-  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Other</u></p>	<p>Date (month, day, year) 03/14/2001</p>	<p>Amount of Each Disbursement This Period 2823.40</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> First Union National Bank  702 Hamilton Mall  Allentown PA 18101-</p>	<p>Purpose of Disbursement Operating Expenditure Minimum Balance Fa  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Other</u></p>	<p>Date (month, day, year) 04/03/2001</p>	<p>Amount of Each Disbursement This Period 25.00</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> HearstStonePress  P.O. Box 446  Red Hill PA 18076-0446</p>	<p>Purpose of Disbursement Operating Expenditure Campaign Advertis  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Other</u></p>	<p>Date (month, day, year) 02/26/2001</p>	<p>Amount of Each Disbursement This Period 365.00</p>

**SUBTOTALS** of Disbursements This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>39 / 47</b>
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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Ray Holland  2020 Hamilton Street  Allentown PA 18104	Purpose of Disbursement Operating Expenditure Office Rent - Febr	Date (month, day, year) 02/26/2001	Amount of Each Disbursement This Period 200.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Ray Holland  2020 Hamilton Street  Allentown PA 18104	Purpose of Disbursement Operating Expenditure Office Rent	Date (month, day, year) 03/28/2001	Amount of Each Disbursement This Period 100.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Ray Holland  2020 Hamilton Street  Allentown PA 18104	Purpose of Disbursement Operating Expenditure Office Rent May 8.	Date (month, day, year) 05/21/2001	Amount of Each Disbursement This Period 200.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> La Coline  -	Purpose of Disbursement Operating Expenditure Fundrais- er - Food	Date (month, day, year) 04/25/2001	Amount of Each Disbursement This Period 1341.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressio- nal Comm. 320 First Street, SE  Washington DC 20003-	Purpose of Disbursement In-Kind Satellite Feed	Date (month, day, year) 01/03/2001	Amount of Each Disbursement This Period 37.11
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressio- nal Comm. 320 First Street, SE  Washington DC 20003-	Purpose of Disbursement In-Kind Satellite Feed	Date (month, day, year) 02/07/2001	Amount of Each Disbursement This Period 26.50
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressio- nal Comm. 320 First Street, SE  Washington DC 20003-	Purpose of Disbursement In-Kind Satellite Feed	Date (month, day, year) 02/08/2001	Amount of Each Disbursement This Period 23.93
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressio- nal Comm. 320 First Street, SE  Washington DC 20003-	Purpose of Disbursement In-Kind Satellite Feed	Date (month, day, year) 02/27/2001	Amount of Each Disbursement This Period 12.48
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressio- nal Comm. 320 First Street, SE  Washington DC 20003-	Purpose of Disbursement In-Kind Satellite Feed	Date (month, day, year) 02/28/2001	Amount of Each Disbursement This Period 34.18
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		

**SUBTOTALS** of Disbursements This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>40 / 47</b>
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<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Purpose of Disbursement In-Kind Satellite Feed	Date (month, day, year) 03/21/2001	Amount of Each Disbursement This Period 29.45
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Purpose of Disbursement In-Kind Satellite Feed	Date (month, day, year) 03/29/2001	Amount of Each Disbursement This Period 14.73
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Purpose of Disbursement In-Kind Satellite Feed	Date (month, day, year) 04/03/2001	Amount of Each Disbursement This Period 117.81
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Purpose of Disbursement In-Kind Satellite Feed	Date (month, day, year) 04/04/2001	Amount of Each Disbursement This Period 20.10
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Purpose of Disbursement In-Kind Blast Fax	Date (month, day, year) 04/10/2001	Amount of Each Disbursement This Period 98.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Purpose of Disbursement In-Kind Satellite Feed	Date (month, day, year) 04/26/2001	Amount of Each Disbursement This Period 23.56
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Purpose of Disbursement In-Kind Satellite Feed	Date (month, day, year) 05/02/2001	Amount of Each Disbursement This Period 29.45
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Purpose of Disbursement In-Kind Satellite Feed	Date (month, day, year) 05/09/2001	Amount of Each Disbursement This Period 26.18
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> National Republican Congressional Comm. 320 First Street, SE Washington DC 20003-	Purpose of Disbursement In-Kind Satellite Feed	Date (month, day, year) 05/17/2001	Amount of Each Disbursement This Period 235.61
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		

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<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>42 / 47</b>
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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Postmaster 1000 Postal Road Allentown PA 18103-8900	Purpose of Disbursement Operating Expenditure Postage - F/R @ MI	Date (month, day, year) 04/05/2001	Amount of Each Disbursement This Period 68.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> Postmaster 1000 Postal Road Allentown PA 18103-8900	Purpose of Disbursement Operating Expenditure Postage for prospe	Date (month, day, year) 04/12/2001	Amount of Each Disbursement This Period 136.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> Postmaster 1000 Postal Road Allentown PA 18103-8900	Purpose of Disbursement Operating Expenditure 2 rolls stamps	Date (month, day, year) 05/29/2001	Amount of Each Disbursement This Period 68.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> SCM Associates 10 MainStreet P.O. Box 720 Jaffrey NH 03452-0720	Purpose of Disbursement Operating Expenditure Campaign Mailing 1	Date (month, day, year) 05/04/2001	Amount of Each Disbursement This Period 2004.46
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> SCM Associates 10 MainStreet P.O. Box 720 Jaffrey NH 03452-0720	Purpose of Disbursement Operating Expenditure 11661, fundraising	Date (month, day, year) 06/04/2001	Amount of Each Disbursement This Period 705.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Patrick J. Toomey 5250 Wheatland Drive Zionsville PA 18092-	Purpose of Disbursement Operating Expenditure reimburse sweeping	Date (month, day, year) 01/16/2001	Amount of Each Disbursement This Period 1336.47
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Patrick J. Toomey 5250 Wheatland Drive Zionsville PA 18092-	Purpose of Disbursement Operating Expenditure GOP Retr- eat Expens	Date (month, day, year) 02/22/2001	Amount of Each Disbursement This Period 1076.88
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Patrick J. Toomey 5250 Wheatland Drive Zionsville PA 18092-	Purpose of Disbursement Operating Expenditure Inaugural Exp: foo	Date (month, day, year) 02/22/2001	Amount of Each Disbursement This Period 935.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Patrick J. Toomey 5250 Wheatland Drive Zionsville PA 18092-	Purpose of Disbursement Operating Expenditure Travel to PA Leads	Date (month, day, year) 04/26/2001	Amount of Each Disbursement This Period 168.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		

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<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>43 / 47</b>
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**NAME OF COMMITTEE (In Full)**  
**PAT TOOMEY FOR CONGRESS COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Patrick J. Toomey  5250 Wheatland Drive  Zionsville PA 18092-	Purpose of Disbursement Operating Expenditure Travel NY/DC NRCC	Date (month, day, year) 06/18/2001	Amount of Each Disbursement This Period 204.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> Verizon/Bel Atlantic  201 Starwix St  Pittsburgh PA 15222-	Purpose of Disbursement Operating Expenditure Telephone	Date (month, day, year) 01/11/2001	Amount of Each Disbursement This Period 294.44
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> Verizon/Bel Atlantic  201 Starwix St  Pittsburgh PA 15222-	Purpose of Disbursement Operating Expenditure Telephone Service	Date (month, day, year) 02/16/2001	Amount of Each Disbursement This Period 81.76
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> Verizon/Bel Atlantic  201 Starwix St  Pittsburgh PA 15222-	Purpose of Disbursement Operating Expenditure Telephone Service	Date (month, day, year) 03/14/2001	Amount of Each Disbursement This Period 70.10
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> Verizon/Bel Atlantic  201 Starwix St  Pittsburgh PA 15222-	Purpose of Disbursement Operating Expenditure Telephone service	Date (month, day, year) 04/02/2001	Amount of Each Disbursement This Period 78.43
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> Verizon/Bel Atlantic  201 Starwix St  Pittsburgh PA 15222-	Purpose of Disbursement Operating Expenditure Telephone service	Date (month, day, year) 04/26/2001	Amount of Each Disbursement This Period 82.21
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		
<b>Full Name, Mailing Address, and ZIP Code</b> Verizon/Bel Atlantic  201 Starwix St  Pittsburgh PA 15222-	Purpose of Disbursement Operating Expenditure Telephone Service	Date (month, day, year) 06/04/2001	Amount of Each Disbursement This Period 85.08
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other		

**SUBTOTALS** of Disbursements This Page (Optional) .....

**TOTALS** This Period (last page this line number only) ..... **22493.33**

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>44 / 47</b>
			FOR LINE NUMBER 18b
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<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>			
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Patrick J. Toomey  5250 Wheatland Drive  Zionsville PA 18092-	<b>Purpose of Disbursement</b> Repay Loan Made/Guar. by Card Final Loan  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>General 2000</u>	<b>Date (month, day, year)</b> 01/02/2001	<b>Amount of Each Disbursement This Period</b> 50000.00
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>50000.00</b>

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>		<b>45 / 47</b>
		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER <b>21</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>			
<b>Full Name, Mailing Address, and ZIP Code</b> Bill Shuster For Congress  P.O. Box 27  Holidaysburg PA 16648-	<b>Purpose of Disbursement</b> Other Disbursement Political Contribution  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 03/30/2001	<b>Amount of Each Disbursement This Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Committee to Elect Judge Simpson 2925 William Penn Highway Suite 301 Easton PA 18045-5283	<b>Purpose of Disbursement</b> Other Disbursement Political Contribution  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 03/28/2001	<b>Amount of Each Disbursement This Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Friends of Renee Cohn  Attn: Peter Shaffer 1104 S. Cedar Crest Blvd Allentown PA 18103-	<b>Purpose of Disbursement</b> Other Disbursement Political Contribution  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 03/19/2001	<b>Amount of Each Disbursement This Period</b> 1000.00
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>3000.00</b>

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>46 / 47</b>
			FOR LINE NUMBER 20c
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<b>NAME OF COMMITTEE (In Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>			
<b>Full Name, Mailing Address, and ZIP Code</b> Harold Fulmer  HGF Group 1444 Hamilton Street Allentown PA 18102-	<b>Purpose of Disbursement</b> Refund of Contribution Excess Contribut	<b>Date (month, day, year)</b> 03/07/2001	<b>Amount of Each Disbursement This Period</b> 1000.00
		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Primary	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>1000.00</b>

<b>SCHEDULE C</b> (Revised 3/80)	<b>LOANS</b>	Use separate schedule(s) for each numbered line	<b>47 / 47</b>
			FOR LINE NUMBER <b>10</b>
<b>NAME OF COMMITTEE (in Full)</b> <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>			
Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Patrick J. Toomey 5250 Wheatland Drive  Zionsville PA 18092-	Original Amount of Loan  125000.00	Cumulative Payment to Date  125000.00	Balance Outstanding at Close of This Period  0.00
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Primary 1998			
TERMS: Date incurred: 03/31/1998 Date Due: Interest Rate(%) = .0000 <input type="checkbox"/> Secured			
<b>SUBTOTALS</b> This Period This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>0.00</b>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary			

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