

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2002 MAR 21 P 1:08

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) Committee to Elect Ed O'Brien		2. FEC IDENTIFICATION NUMBER C00351718
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. P. O. Box 447		
CITY, STATE and ZIP CODE Bethlehem, PA 18018	STATE/DISTRICT PA-15	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

- April 15 Quarterly Report
- 12-Day Pre-Election Report for the Primary (Type of Election)
election on 4/4/00 in the State of Pennsylvania
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____
- Termination Report

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

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>1/1/00</u> through <u>3/15/00</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$159,410.00	\$159,410.00
(b) Total Contribution Refunds (from Line 20(d))	\$200.00	\$200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$159,210.00	\$159,210.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$20,590.26	\$20,590.26
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$0.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	\$20,590.26	\$20,590.26
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$198,266.06	
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)	\$1,400.00	

For further information contact:
Federal Election Commission
699 E Street, NW
Washington, DC 20543
Toll Free 800-424-9530
Local 202-694-1100

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

Signature of Treasurer Stephen D. Dobrosky

Date

3/17/00

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)

Report of Dr.

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(PAGE 2, FEC FORM 3)

Name of Committee (in full) Committee to Elect Ed O'Brien	Report Covering the Period:	
	From: 1/1/00	To: 3/15/00
I. RECEIPTS		
11. CONTRIBUTIONS (other than loans) FROM:	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
(a) Individuals/Persons Other Than Political Committees		
(1) Itemized (Use Schedule A)	\$56,928.00	
(2) Unitemized	\$18,367.00	
Total of contributions from individuals	\$75,295.00	\$75,295.00
(b) Political Party Committees	\$40.00	\$40.00
(c) Other Political Committees (such as PACs)	\$83,950.00	\$83,950.00
(d) The Candidate	\$125.00	\$125.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(1), (b), (c) and (d))	\$159,410.00	\$159,410.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
13. LOANS:		
(a) MADE OR GUARANTEED BY THE CANDIDATE	\$1,400.00	\$1,400.00
(b) ALL OTHER LOANS	\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))	\$1,400.00	\$1,400.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	\$0.00	\$0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	\$0.00	\$0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	\$160,810.00	\$160,810.00
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	\$20,790.26	\$20,790.26
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) Of All Other Loans	\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	\$0.00	\$0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	\$200.00	\$200.00
(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))	\$200.00	\$200.00
21. OTHER DISBURSEMENTS	\$0.00	\$0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	\$20,790.26	\$20,790.26

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ -
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 50,266.32
25. SUBTOTAL (add Line 23 and Line 24)	\$ 50,266.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 20,790.26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 29,476.06
	\$ 29,476.06

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 17
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code for Congress, Affertach P. O. Box 20605 Lehigh Valley, PA 18002 0605	Name of Employer Information Requested	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested Aggregate Year-to-Date > \$	3/13/00	\$1,000.00
B. Full Name, Mailing Address and ZIP Code James J. Anderson 205 Lurgan Rd. New Hope, PA 18938	Name of Employer Anderson Construction	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Executive Aggregate Year-to-Date > \$	2/25/00	\$1,000.00
C. Full Name, Mailing Address and ZIP Code James J. Anderson 205 Lurgan Rd. New Hope, PA 18938	Name of Employer Anderson Construction	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Executive Aggregate Year-to-Date > \$	2/25/00	\$1,000.00
D. Full Name, Mailing Address and ZIP Code Louis J. Bauer 1917 S. 5th St. Allentown, PA 18103	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$	3/2/00	\$80.00
E. Full Name, Mailing Address and ZIP Code Louis J. Bauer 1917 S. 5th St. Allentown, PA 18103	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$	3/6/00	\$1.00
F. Full Name, Mailing Address and ZIP Code Louis J. Bauer 1917 S. 5th St. Allentown, PA 18103	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$	2/25/00	\$1.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$	3/2/00	\$3.00
SUBTOTAL of Receipts This Page (optional)			\$3,082.00
TOTAL This Period (last page and one number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 17 FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

Any information copied from such Receipts 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)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Louis J. Bauer 1917 S. 5th St. Allentown, PA 18103	Retired	2/8/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired Aggregate Year-to-Date: \$		\$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edwin H. Beachler, III 312 Boulevard of the Allies Pittsburgh, PA 15222-1916	Caroselli, Beachler, McTiernan &	2/25/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$		\$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edwin H. Beachler, III 312 Boulevard of the Allies Pittsburgh, PA 15222-1916	Caroselli, Beachler, McTiernan &	2/22/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$		\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James J. Dadotha 576 Audybon Ave. Mt. Lebanon, PA 15228-2602	Goldberg, Paraky, Jonnings & White PC	2/23/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$		\$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jill M. Bugby 525 Blery's Enclave Road Bethlehem, PA 18017	Information Requested	3/13/00	\$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Information Requested Aggregate Year-to-Date: \$		\$400.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Andrew M. Cantor 6 Spring Knoll Ct Luthersville, MD 21093	Law Offices of Peter Angelos	3/14/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$		\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: \$		

SUBTOTAL of Receipts This Page (optional)	\$4,150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 17
FOR LINE NUMBER 11(a)(j)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David P. Chenierick 417 Cadberry Court Pittsburgh, PA 15241	Goldberg, Peraky, Jennings & White PC	2/23/00	\$400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > \$400.00	
B. Full Name, Mailing Address and ZIP Code William Graf Cook, Jr. P. O. Box 438 West Seventh Ave. Homestead, PA 15120	Name of Employer: Lehigh Heavy Forge Corp.	Date (month, day, year): 3/15/00	Amount of Each Receipt this Period: \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: Executive	Aggregate Year-to-Date > \$57,000.00	
C. Full Name, Mailing Address and ZIP Code William Graf Cook, Jr. P. O. Box 438 West Seventh Ave. Homestead, PA 15120	Name of Employer: Lehigh Heavy Forge Corp.	Date (month, day, year): 3/15/00	Amount of Each Receipt this Period: \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: Executive	Aggregate Year-to-Date > \$57,000.00	
D. Full Name, Mailing Address and ZIP Code John L. Crampsie P.O. Box 84 Laurys Station, PA 15060	Name of Employer: Summit Realty	Date (month, day, year): 2/22/00	Amount of Each Receipt this Period: \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: Real Estate	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code Cunningham, Friends 334 Seventh Ave. Bethlehem, PA 18018	Name of Employer: City of Bethlehem	Date (month, day, year): 2/23/00	Amount of Each Receipt this Period: \$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: City of Bethlehem	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code Cunningham, Friends 334 Seventh Ave. Bethlehem, PA 18018	Name of Employer: City of Bethlehem	Date (month, day, year): 3/13/00	Amount of Each Receipt this Period: \$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: City of Bethlehem	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	\$3,900.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each instance of the unrelated Summary Page

PAGE 4 OF 17
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Cash Receipt This Period
Michael J. Darragh 2504 Plantation Point Ln. Birmingham, AL 35226 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Brandenburg Industrial Services Operations Manager Aggregate Year-to-Date > \$	2/2/00	\$250.00
B. Full Name, Mailing Address and ZIP Code Kent Dauten 16 Country Lane Northfield, IL 60093 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 3/13/00	Amount of Cash Receipt This Period \$500.00
D. Full Name, Mailing Address and ZIP Code James A. Del Greco 950 Highview Road Pittsburgh, PA 15234 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 2/17/00	Amount of Cash Receipt This Period \$500.00
D. Full Name, Mailing Address and ZIP Code Christina M. Dougherty 155B Farm Lane Bethlehem, PA 18018 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 1/6/00	Amount of Cash Receipt This Period \$500.00
E. Full Name, Mailing Address and ZIP Code Francis R. Dougherty 155B Farm Lane Bethlehem PA 18018 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 3/8/00	Amount of Cash Receipt This Period \$1.00
F. Full Name, Mailing Address and ZIP Code Francis R. Dougherty 155B Farm Lane Bethlehem, PA 18018 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 2/25/00	Amount of Cash Receipt This Period \$1.00
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Cash Receipt This Period

SUBTOTAL of Receipts This Page (optional)	\$1,752.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Francis R. Dougherty 1558 Farm Lane Bethlehem, PA 18018	Retired	1/8/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Donald W. Dunlevy 278 Beacon Dr. Harrisburg, PA 17112	United Transportation Union (UTU)	2/8/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Lobbyist Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James D. English 2304 Brookdale Dr. Upper Saint Clair, PA 15241	United Steelworkers of America	2/22/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant to the President Aggregate Year-to-Date > \$ 250.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Louis C. Falcone 825 Kern St. Bethlehem, PA 18015		2/25/00	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 10.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Louis C. Falcone 825 Kern St. Bethlehem, PA 18015		3/14/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 100.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Louis C. Falcone 825 Kern St. Bethlehem, PA 18015		2/16/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 100.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	\$1,960.00
TOTAL This Period (last page this five number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **6** OF **17**
FOR LINE NUMBER **11(a)(i)**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Committee to Elect Ed O'Brien CD0351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carl B. Frankel 622 Gettysburg St. Pittsburgh, PA 15206	USWA Occupation: Counsel	3/14/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William M. George 2803 N. Rosegarden Blvd. Mechanicsburg, PA 17055-5312	PA AFL-CIO Occupation: President	2/17/00	\$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$300.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Theodore Goldberg 261 Troutwood West Dr. Pittsburgh, PA 15241	Goldberg, Parsky, Jennings & White PC Occupation: Attorney	2/23/00	\$750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$750.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald G. Harley 3115 N. Fairview Ave. #65 Tucson, AZ 85705	Occupation:	2/2/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan L. Hoffman 3645 Military Avenue Los Angeles, CA 90034-7005	Occupation:	1/11/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan L. Hoffman 3645 Military Avenue Los Angeles, CA 90034-7005	Occupation:	1/11/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation:		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$3,550.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)
Committee to Elect Ed O'Brien 200351719

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hunt, Friends of Sheryl 68 E. Union Blvd. Bethlehem, PA 18018	Information Requested	3/8/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested		
	Aggregate Year-to-Date >	\$1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gary J. Ignatowski 5407 Biddison Avenue Baltimore, MD 21208-3555	Law Offices of Peter Angelos	3/14/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
	Aggregate Year-to-Date >	\$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Marc S. Jacobs 624 General Lafayette Rd Merion, PA 19066	Galfand, Berger, Lurie Law Firm	3/14/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
	Aggregate Year-to-Date >	\$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert L. Jennings, Jr. 3078 Henrich Farm Ln Allison Park, PA 15101-1519	Goldberg, Persky, Jennings & White PC	2/23/00	\$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): x	Occupation		
	Aggregate Year-to-Date >	\$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Debra A. Jensen 7704 Pine Road Wyndmoor, PA 19038	Galfand, Berger, Lurie Law Firm	3/14/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman		
	Aggregate Year-to-Date >	\$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Eugene J. Keilin Keilin & Co LLC 200 Park Ave., 5th Floor New York, NY 10166	Keilin & Co LLC	3/15/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$	

SUBTOTAL of Receipts This Page (optional)	\$4,650.00
TOTAL This Period (local payee uses this number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the required summary page

PAGE 8 OF 17
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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)

Committee to Elect Ed O'Brien C00351716

A. Full Name, Mailing Address and ZIP Code Bernard Kleinman 110 Schenley Road Pittsburgh, PA 15217 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer USWA Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 1/21/00 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Joseph C. Kohn, Esq. 240 Sugartown Rd. Dover, PA 10332 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer Kohn, Swift & Graf Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 3/4/00 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Edward John Lilly 3573 Mill Green Road Stratton, MD 21154 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer Law Offices of Peter Angelos Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 3/14/00 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code Joseph Lurie 1810 Addison St. Philadelphia, PA 19148 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer Galfand, Berger, Lurie Law Firm Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 2/25/00 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Richard L. Master 2280 Newlins Mill Rd. Easton, PA 18045 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer MCS Industries Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 2/23/00 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code R. Bruce McElhona 1309 Marquis Court Fallston, MD 21047 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer Law Offices of Peter Angelos Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 3/14/00 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) \$1,000.00	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)			\$6,000.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedules (a) for each category of the Detailed Summary Page

PAGE 9 OF 17
FORM NUMBER 11(a)(1)

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

NAME OF COMMITTEE (in Full)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul A. McGinley P.O. Box 4060 Allentown, PA 18105-4060	Self Employed	2/22/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$	\$600.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mark C. Meyer 4382 Kilbert Dr. Allison Park, PA 15101	Goldberg, Persky, Jennings & White PC	2/23/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$	\$250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Todd S. Miller 41 N. 5th St. Allentown, PA 18101	Todd Miller & Associates	2/11/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: Self Employed Aggregate Year-to-Date: \$	\$500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Thomas Minkin 6 Red Cedar Court Baltimore, MD 21208	Law Offices of Peter Angelos	3/14/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$	\$1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edward P. Monaghan 124 Normandy Drive Silver Spring, MD 20901	Law Offices of Peter G. Angelos	3/14/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$	\$1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Charles Nomoth 724 Third Avenue Baltimore, PA 18018	Retired	3/14/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: Retired Aggregate Year-to-Date: \$	\$100.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: \$		
SUBTOTAL of Receipts This Page (optional)			\$3,350.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 10 OF 17
FOR LINE NUMBER 33(9)(1)

Contributions from Individuals/Persons

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)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Nemeth 724 Third Avenue Bethlehem, PA 18018 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Retired Aggregate Year-to-Date > \$	3/6/00 2/11/00	\$1.00
Charles Nemeth 724 Third Avenue Bethlehem, PA 18018 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Retired Aggregate Year-to-Date > \$	2/25/00 2/11/00	\$10.00
Charles Nemeth 724 Third Avenue Bethlehem, PA 18018 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): X	Retired Retired Aggregate Year-to-Date > \$	2/16/00 2/16/00	\$100.00
Lorraine L. Novelli 107 St. Andrews Dr. Pittsburgh, PA 15206 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): X	Retired Retired Aggregate Year-to-Date > \$	2/22/00 2/22/00	\$1,000.00
Lorraine L. Novelli 107 St. Andrews Dr. Pittsburgh, PA 15206 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): X	Retired Retired Aggregate Year-to-Date > \$	2/22/00 2/22/00	\$1,000.00
Todd C. Novelli 915 Washington Ave. Carnegie, PA 15106 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): X	General American Government Consultant Aggregate Year-to-Date > \$	2/9/00 2/9/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	2/22/00	\$1,000.00
SUBTOTAL of Receipts This Page (optional)			\$2,611.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 17
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Committee to Elect Ed O'Brien CD035171B

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mary Wini O'Brien 6350 Canton St. Pittsburgh, PA 15217	USWA	1/31/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Department Head Aggregate Year-to-Date > \$	\$1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Terrance M. O'Brien 65 Lambeth Dr. Pittsburgh, PA 15241	Goldberg, Persky, Jennings & White PC	2/23/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$	\$250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard J. Orloski Orloski, Hinge & Pandaleon 111 N. Cedar Crest Blvd. Allentown, PA 18104	Self-Employed	3/0/00	\$280.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$	\$280.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Peter T. T. Paladino, Jr. 421 Oaklawn Dr. Pittsburgh, PA 15241	Goldberg, Persky, Jennings & White PC	2/23/00	\$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$	\$400.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Peter T. T. Paladino, Jr. 421 Oaklawn Dr. Pittsburgh, PA 15241	Goldberg, Persky, Jennings & White PC	3/1/00	(\$400.00)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$	\$400.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Peter T. T. Paladino, Jr. 421 Oaklawn Dr. Pittsburgh, PA 15241	Goldberg, Persky, Jennings & White PC	3/10/00	\$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$	\$400.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$1,900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **12** OF **17**
FOR LINE NUMBER **11(a)(i)**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Andrew V. Palm 1901 Victoria Lane Irwin, PA 15642-5806 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	United Sheetworkers of America Director, District 10 Aggregate Year-to-Date \$	2/22/00 \$4,000.00	\$1,000.00
David L. Palmer 3606 Jackson Cabin Road Phoenix, MD 21131 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Law Offices of Peter Angelos Attorney Aggregate Year-to-Date \$	3/14/00 \$4,000.00	\$1,000.00
Peter M. Patton 703 Grove Place Havertown, PA 19083-5628 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Galfand, Berger, Lurie Attorney Aggregate Year-to-Date \$	3/14/00 \$1,000.00	\$1,000.00
Joel I. Persky 5810 Ayleshorn Ave Pittsburgh, PA 15217 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Goldberg, Parsky, Jennings & White PC Occupation Aggregate Year-to-Date \$	2/23/00 \$1,000.00	\$750.00
Stephen Presser 755 West End Avenue, Apt 8A New York, NY 10025 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Keilin & Co LLC Occupation Aggregate Year-to-Date \$	3/15/00 \$250.00	\$250.00
Michael Psaros 105 Stonewall Circle West Harrison, NY 10604 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Keilin & Co LLC Occupation Aggregate Year-to-Date \$	3/15/00 \$250.00	\$250.00
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)			\$4,250.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 13 OF 17
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in full)

Committee to Elect Ed O'Brien C0035171B

A. Full Name, Mailing Address and ZIP Code Rangel for Congress, P. O. Box 5577, Manhattanville Station New York, Ne 10027 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Political Com. Aggregate Year-to-Date > \$	Date (month, day, year) 2/28/00 \$3,000.00	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Rangel for Congress, P. O. Box 5577, Manhattanville Station New York, Ne 10027 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Political Com. Aggregate Year-to-Date > \$	Date (month, day, year) 2/28/00 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code John H. Reck 269 Roberts Dr. King of Prussia, PA 19406 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 2/17/00 \$50.00	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and ZIP Code John H. Reck 269 Roberts Dr. King of Prussia, PA 19406 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 2/9/00 \$200.00	Amount of Each Receipt this Period \$200.00
E. Full Name, Mailing Address and ZIP Code Edward Reeves 3028 Fairdale Road Philadelphia, PA 19154-1804 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Law Offices of Peter Angelos Occupation Law Offices of Peter Angelos Aggregate Year-to-Date > \$	Date (month, day, year) 3/2/00 \$500.00	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code Reibman, Citizens fo 1231 Lieb Road Easton, PA 18040 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Political Committee Occupation Political Committee Aggregate Year-to-Date > \$	Date (month, day, year) 2/29/00 \$700.00	Amount of Each Receipt this Period \$700.00
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$3,450.00
TOTAL This Period (next page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 14 OF 17
FORM LINE NUMBER 11(a)(3)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carol Reinert 107 Roth Avenue Hellertown, PA 18055 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	USWA Local 2599 Occupation: Secretary Aggregate Year-to-Date > \$ 5500.00	2/3/00	\$500.00
Chester A. Raybitz 428 E. Broad St. P. O. Box 1445 Carlisle, PA 17016 1445 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Self-Employed Occupation: Attorney Aggregate Year-to-Date > \$ 0000.00	Date (month, day, year): 3/8/00	Amount of Each Receipt this Period: \$300.00
Janice M. Savinié 1602 Sarah St. Pittsburgh, PA 15208-1741 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): X	Name of Employer: Goldberg, Persky, Jennings & White PC Occupation: Attorney Aggregate Year-to-Date > \$	Date (month, day, year): 2/23/00	Amount of Each Receipt this Period: \$250.00
Richard M. Schopise 8517 Timothy Court Bensalem, PA 19020-1024 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): X	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date > \$	Date (month, day, year): 3/16/00	Amount of Each Receipt this Period: \$283.00
David P. Shapiro 321 W. 78th St., Apt. B D New York, NY 10024-8525 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): X	Name of Employer: Kofin & Co LLC Occupation: Information Requested Aggregate Year-to-Date > \$	Date (month, day, year): 3/15/00	Amount of Each Receipt this Period: \$500.00
Cinda S. Six P. O. Box 188 Gettysburg, PA 17050 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): X	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date > \$	Date (month, day, year): 3/14/00	Amount of Each Receipt this Period: \$500.00
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > \$	Date (month, day, year):	Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional)

\$2,333.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 15 OF 17
FOR LINE NUMBER 11(a)(3)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert J. Gugganman 100 N. 17th St., 7th Floor Philadelphia, PA 19103-2703 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Gugganman Associates Occupation: Attorney Aggregate Year-to-Date > \$ 500.00	3/14/00 \$500.00	\$500.00
Eric J. Swan 1419 Amity Road Rydal, PA 19046 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Galand, Berger, Lurie Law Firm Occupation: Attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year): 3/13/00 \$1,000.00	Amount of Each Receipt This Period: \$1,000.00
Friends to Elect Chr Tanaglione 1407 Vankirk St. Philadelphia, PA 19149-3327 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): K	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date > \$ 400.00	Date (month, day, year): 3/14/00 \$400.00	Amount of Each Receipt This Period: \$400.00
Joseph M. Trachtenberg 11 Serpentine Drive Clinton, NJ 08809 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): x	Name of Employer: Victaulic Co. of America Occupation: Information Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year): 3/14/00 \$1,000.00	Amount of Each Receipt This Period: \$1,000.00
Craig L. Vandergriff 1545 Beechwood Blvd. Pittsburgh, PA 15217 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): x	Name of Employer: Goldberg, Parsky, Jennings & White PC Occupation: Attorney Aggregate Year-to-Date > \$ 400.00	Date (month, day, year): 2/23/00 \$400.00	Amount of Each Receipt This Period: \$400.00
Armand J. Volta, Jr. 17 Nayborly Court Catonsville, MD 21228 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): x	Name of Employer: Law Offices of Peter Argyelos Occupation: Attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year): 3/14/00 \$1,000.00	Amount of Each Receipt This Period: \$1,000.00
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > \$	Date (month, day, year): \$	Amount of Each Receipt This Period:

SUBTOTAL of Receipts This Page (optional)	\$4,300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate columns for each category of the Detailed Summary Page

PAGE 18 OF 17
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy P. Wallitsch, Esq 1605 N. Cedar Crest Blvd. Allentown, PA 18104	Self	3/14/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Attorney</u> Aggregate Year-to-Date > \$ <u>\$1,000.00</u>		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Weber, III 5 Fawn Ridge Court Reisterstown, MD 21138	Law Offices of Peter G. Angeles	3/14/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Attorney</u> Aggregate Year-to-Date > \$ <u>0</u>		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Adam Wenzel 4211 Harriett Lane Bethlehem, PA 18017	Brandenburg Industrial Services	2/22/00	\$40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): <u>X</u>	Occupation: <u>General Electric</u> Aggregate Year-to-Date > \$ <u>\$250.00</u>		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Adam Wenzel 4211 Harriett Lane Bethlehem, PA 18017	Brandenburg Industrial Services	2/2/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): <u>X</u>	Occupation: <u>General Electric</u> Aggregate Year-to-Date > \$ <u>0</u>		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas W. White 1030 Fifth Avenue Pittsburgh, PA 15210	Goldberg, Persky, Jennings & White PC	2/23/00	\$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): <u>X</u>	Occupation: <u>Attorney</u> Aggregate Year-to-Date > \$ <u>0</u>		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leonard B. Yushko 1031 Windsor Place Bethlehem, PA 18017	Bethlehem Steel Co.	1/31/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Attorney</u> Aggregate Year-to-Date > \$ <u>0</u>		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		00000000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Attorney</u> Aggregate Year-to-Date > \$ <u>0</u>		

SUBTOTAL of Receipts This Page (optional)	\$3,190.00
TOTAL This Period (next page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 17 OF 17
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

Any information copied from such reports and comments may not be valid 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 (if full)

Committee to Elect Ed O'Brien GD351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William R. Caroselli 312 Boulevard of the Allies Pittsburgh, PA 15222-1916	Caroselli, Beachler, McTiernan & Conboy	2/28/00	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$		\$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Howard Grossinger 1000 Law & Finance Building Pittsburgh, PA 15219	Grossinger, Gordon & Valz	3/2/00	\$750.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$		\$1,500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Howard Grossinger 1000 Law & Finance Building Pittsburgh, PA 15219	Grossinger, Gordon & Valz	3/2/00	\$750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$		\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: \$		

SUBTOTAL of Receipts This Page (optional)

\$2,500.00

TOTAL THIS PERIOD (see page this line number only)

\$56,920.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11(b)

Contributions from Party Committees

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)

Committee to Elect Ed O'Brien CD0351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bethlehem Demo. City Com. 47 W. Washington Ave. Bethlehem, PA 18018 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation _____ Aggregate Year-to-Date \$	2/22/00 \$40.00	\$40.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
_____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation _____ Aggregate Year-to-Date \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
_____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation _____ Aggregate Year-to-Date \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
_____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation _____ Aggregate Year-to-Date \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
_____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation _____ Aggregate Year-to-Date \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
_____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation _____ Aggregate Year-to-Date \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
_____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation _____ Aggregate Year-to-Date \$		

SUBTOTAL of Receipts This Page (optional)	\$40.00
TOTAL This Period (last page this line number only)	\$40.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 5
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AFSCME PEOPLE 1628 L St, NW Washington, DC 20036-		2/23/00	\$5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$5,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Fed. Of Teachers COPE 555 New Jersey Ave., NW Washington, DC 20001-		3/14/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Asbestos Workers PAC 1776 Massachusetts Avenue, NW, Suite 301 Washington, DC 20036-		3/13/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Asbestos Workers Political Action Com. 1776 Massachusetts Ave., NW, Suite 301 Washington, DC 20036-		3/15/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Asn. Of Trial Lawyers of America PAC 1050 31st St., NW Washington, DC 20007-		3/15/00	\$2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BCTGM International Union 10401 Connecticut Avenue Kensington, MD 20895-3961		3/10/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
SUBTOTAL of Receipts This Page (optional)			\$10,000.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 5
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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)

Committee to Elect Ed O'Brien CD033-1718

A. Full Name, Mailing Address and ZIP Code Carpenters' Legis. Improvement Committee 101 Constitution Ave., NW Washington, DC 20001- Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 3/2/00 \$5,000.00	Amount of Each Receipt this Period \$5,000.00
B. Full Name, Mailing Address and ZIP Code Committee on Political Education-AFL-CIO 615 16th St., NW Washington, DC 20006- Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 3/7/00 \$2,500.00	Amount of Each Receipt this Period \$2,500.00
C. Full Name, Mailing Address and ZIP Code COPE AFL-CIO 615 16th St., NW Washington, DC 20006- Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 2/11/00 \$2,500.00	Amount of Each Receipt this Period \$2,500.00
D. Full Name, Mailing Address and ZIP Code GWA Local 13000 PAC 2124 Race St. Philadelphia, PA 19103- Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 2/28/00 \$5,000.00	Amount of Each Receipt this Period \$5,000.00
E. Full Name, Mailing Address and ZIP Code NRIVE Political Fund 25 Louisiana Ave., NW Washington, DC 20001- Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 3/15/00 \$5,000.00	Amount of Each Receipt this Period \$5,000.00
F. Full Name, Mailing Address and ZIP Code Graphic Communications International Union 1900 L St., NW Washington, DC 20036-5080 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 3/13/00 \$500.00	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)			\$20,500.00
TOTAL This Period (last page this line number only)			

REGARDING OF

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 6
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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NAME OF COMMITTEE (in Full)

Committee to Elect Ed O'Brien CD0351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
IBEW-COPE 1125 15th St., NW Washington, DC 20005-		2/25/00	\$5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$5,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
International Longshoremen's Assn COPE 17 Battery Place New York, NY 10004-		3/14/00	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$5,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Internat Brotherhood of Painters & Other Allied T 1750 New York Avenue, NW Washington, DC 20008-		3/14/00	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): X	Occupation	Aggregate Year-to-Date > \$	\$5,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Iron Workers Local No. 401 Political Action Fund 11600 Norcom Road Philadelphia, PA 19104-		3/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): X	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
IUE 1128 18th St., NW Washington, DC 20038-		2/17/00	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laborer's Political League 905 16th St., NW Washington, DC 20006-		3/15/00	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) \$20,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 5
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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NAME OF COMMITTEE (in Full)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Machinists Non-Partisan Political League 9000 Machinist Place Upper Marlboro, MD 20772-		3/15/00	\$5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$5,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
National Com. For an Effective Congress (NCEC) 122 G Street, NW Washington, DC 20001-		1/18/00	\$2,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Natl Air Traffic Controllers Assn PAC 1325 Massachusetts Ave., NW Washington, DC 20005-		3/15/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
NEA Fund for Children and Public Education 1201 16th St., NW, Suite 421 Washington, DC 20036-		3/10/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Responsible Citizens Political League 3 Research Place Rockville, MD 20850-		3/9/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Sheet Metal Workers' Internat Assn P A League 1750 New York Avenue, NW Washington, DC 20006-		3/15/00	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$5,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	\$14,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 5
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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NAME OF COMMITTEE (in Full)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Transportation Pol. Educ. League 14600 Detroit Avenue Cleveland, OH 44107 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$	2/22/00 \$5,000.00	\$5,000.00
UAW V CAP 8000 E. Jefferson Avenue Detroit, MI 48214-3963 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 3/7/00 \$5,000.00	Amount of Each Receipt This Period \$5,000.00
UFCW Active Ballot Club 1775 K Street, NW Washington, DC 20006-1588 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 3/10/00 \$3,000.00	Amount of Each Receipt This Period \$3,000.00
UNITE Campaign Committee 1710 Broadway New York, NY 10019 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 3/8/00 \$1,200.00	Amount of Each Receipt This Period \$1,200.00
USWA Political Action Fund 5 Gateway Center Pittsburgh, PA 15222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 2/22/00 \$4,750.00	Amount of Each Receipt This Period \$4,750.00
P. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 03/10/00 \$4,750.00	Amount of Each Receipt This Period \$4,750.00
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt This Period
SUBTOTAL of Receipts This Page (optional)			\$18,950.00
TOTAL This Period (last page this line number only)			\$63,950.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11(d)

Contributions from the Candidate

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 collect contributions from such committee.

NAME OF COMMITTEE (in Full)

Committee to Elect Ed O'Brien C00851718

A. Full Name, Mailing Address and ZIP Code	Name of Employer * In-Kind: St. Patrick's Day Parade Description	Date (month, day, year)	Amount of Each Receipt this Period
Edward J. O'Brien 1775 Chapel Avenue Allentown, PA 18103		3/2/00	\$125.00 *
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,525.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	\$125.00
TOTAL This Period (last page into line number only)	\$125.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 13(a)

Loans Made or Guaranteed by the Candidate

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)

Committee to Elect Ed O'Brien C00251718

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward J. O'Brien 1775 Chapel Avenue Allentown, PA 18103		2/2/00	\$1,400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	\$1,400.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
SUBTOTAL of Receipts This Page (upward)			\$1,400.00
TOTAL This Period (last page this line number only)			\$1,400.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 4
FOR LINE NUMBER 17

Operating Expenditures

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)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Best Buy MacArthur Road Whitehall, PA	Purchase of Computer Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/24/00	\$1,382.77
Edward J. O'Brien 1775 Chapel Avenue Allentown, PA 18103	St. Patrick's Day Parade Ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/2/00	\$125.00 *
Edward J. O'Brien 1775 Chapel Avenue Allentown, PA 18103	Reimbursement for tickets, etc. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/1/00	\$98.25
Edward J. O'Brien 1775 Chapel Avenue Allentown, PA 18103	Bell Atlantic Telephone Acct De Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/2/00	\$1,400.00 *
First Union National Bank West Broad Street Branch Bethlehem, PA 18018	W/H Tax Deposit Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/15/00	\$357.50
Ms. Deborah Gawlick 929 Wood Street Bethlehem, PA 18018	Purchase Money Order for Filing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/20/00	\$150.00
Ms. Deborah Gawlick 929 Wood Street Bethlehem, PA 18018	Party Cash Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/1/00	\$63.81
Ms. Deborah Gawlick 929 Wood Street Bethlehem, PA 18018	Party Cash Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/10/00	\$80.81
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional) \$3,588.94

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 4
FOR LINE NUMBER 17

Operating Expenditures

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)

Committee to Elect Ed O'Brien C00354718

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ms. Deborah Gawlick 929 Wood Street Bethlehem, PA 18018	Establish Petty Cash Account Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/12/00	\$100.00
B. Full Name, Mailing Address and ZIP Code Mr. Sean Rankin 235 Claremont Avenue Montclair, NJ 07042	Purpose of Disbursement Fund Raising Consultant-Jan. 2 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/21/00	\$3,000.00
C. Full Name, Mailing Address and ZIP Code Mr. Sean Rankin 235 Claremont Avenue Montclair, NJ 07042	Purpose of Disbursement Feb. 2000 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/15/00	\$3,000.00
D. Full Name, Mailing Address and ZIP Code National Com. For an Effective Congress (NCEC)	Purpose of Disbursement Electoral Targeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/19/00	\$2,500.00 *
E. Full Name, Mailing Address and ZIP Code NGP Software Washington, DC	Purpose of Disbursement Purchase of Campaign Office Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/1/00	\$1,000.00
F. Full Name, Mailing Address and ZIP Code Ms. Erin Clare Quinn 21 West North St. Bethlehem, PA 18018	Purpose of Disbursement 2/23/00-3/1/00 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/1/00	\$327.06
G. Full Name, Mailing Address and ZIP Code Ms. Erin Clare Quinn 21 West North St. Bethlehem, PA 18018	Purpose of Disbursement Campaign Staff-1/23/00-2/22/00 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/1/00	\$1,200.25
H. Full Name, Mailing Address and ZIP Code Renaissance Studio 514 West Broad Street Bethlehem, PA 18018	Purpose of Disbursement Photog. Head Shots Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/11/00	\$240.30
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	\$1,367.61
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 4
FOR LINE NUMBER 17

Operating Expenditures

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)

Committee to Elect Ed O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Remembrance Studio 614 West Broad Street Bethlehem, PA 18018	Photographer-Gilding Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/4/00	\$35.00
Rindy, Miller & Bates Scott Sales 601 N. International Austin, TX 78702	Media Consulting Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/10/00	\$1,500.00
Schlecker Printing 1148 Washington Street Allentown, PA 18102	Letterhead, Envelopes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/14/00	\$1,027.84
Staples Union Boulevard Allentown, PA 18103	Office Supplies Purchased Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/16/00	\$403.88
The Palace Banquet Hall Lansford, PA	2/26/00 Fundraiser Invoice Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/1/00	\$1,250.00
U. S. Postal Service Wood Street Branch Bethlehem, PA 18018	Purchase of Stamps Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/4/00	\$990.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	\$5,201.92
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 4
FOR LINE NUMBER 172

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)

Committee to Elect Ed O'Brien

C00351718

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Postmaster Wood. Street Branch Bethlehem, PA 18018	P. O. Box Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/6/00	\$35.00
B. Full Name, Mailing Address and ZIP Code Team Office Products 4464 Spring Hill Drive Schnecksville, PA 18078	Purpose of Disbursement Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/12/00	\$16.03
C. Full Name, Mailing Address and ZIP Code Dept. of Scopus Ministry R R 1 Box 307 Bolivar, PA 15923	Purpose of Disbursement Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/4/00	\$ 50.00
D. Full Name, Mailing Address and ZIP Code Federal Express P. O. Box 1140 Memphis, TN 38101	Purpose of Disbursement C O D Charge Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/4/00	\$10.00
E. Full Name, Mailing Address and ZIP Code Service Electric Telephone 4242 Mauch Chunk Road Coplay, PA 180733	Purpose of Disbursement Telephone Installation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/4/00	\$196.94
F. Full Name, Mailing Address and ZIP Code Radio Shack 1832 Stefko Blvd. Bethlehem, PA 18017	Purpose of Disbursement Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/17/00	\$23.82
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$331.79

TOTAL This Period (last page this line number only)

\$20,590.26

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate entries for each category of the Unreimbursed Summary Page

PAGE 1 OF 2
FOR LINE NUMBER 20(a)

Refunds of Contributions to Individuals

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)

Committee in Elect Ed. O'Brien C00351718

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dynamic Detailing Plus. Powerwash 940 E. Juniper St. Allentown, PA 18108	Refund of contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/22/00	\$200.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$200.00

TOTAL This Period (last page this line number only)

\$200.00

LOANS

Name of Committee (In Full) Committee to Elect Ed O'Brien		FEC # G00351718	
A. Full Name, Mailing Address and ZIP Code of Loan Source Ed O'Brien (Candidate) 1775 Chapel Avenue Allentown, PA 18103	Original Amount of Loan \$1,400	Cumulative Payment To Date -0-	Balance Outstanding at Close of This Period \$1,400
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____ Terms: Date Incurred <u>2/2/00</u> Date Due <u>On Demand</u> Interest Rate <u>0% (app)</u> <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (If any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$	(This area is shaded to indicate that the information is not to be reported.)	
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____ Terms: Date Incurred _____ Date Due _____ Interest Rate _____ (app) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (If any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$	(This area is shaded to indicate that the information is not to be reported.)	
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional)			\$1,400
TOTALS This Period (last page in this line only)			\$1,400
Carry outstanding balance only to LINE 8, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>3-21-00</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>Jes</i> PREPARER	<i>3-21-00</i> DATE PREPARED