

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

APR 19 3 34 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Borski for Congress Committee

ADDRESS (number and street) Check if different than previously reported.
P.O. Box 26846

CITY, STATE and ZIP CODE **Philadelphia, PA 19134** STATE/DISTRICT **PA/03**

2. FEC IDENTIFICATION NUMBER
C00148429

3. IS THIS REPORT AN AMENDMENT?
 YES NO

4. TYPE OF REPORT

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

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


SUMMARY

5. Covering Period <u>1/1/98</u> through <u>3/31/98</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$ 42,704.43	\$ 42,704.43
(b) Total Contribution Refunds (from Line 20(d))	- 0 -	- 0 -
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$ 42,704.43	\$ 42,704.43
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$ 20,554.65	\$ 20,554.65
(b) Total Offsets to Operating Expenditures (from Line 14)	- 0 -	- 0 -
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	\$ 20,554.65	\$ 20,554.65
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$322,942.58	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	20,000.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	- 0 -	

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

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Anthony Szuszczewicz

Signature of Treasurer  Date _____

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

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full)	Report Covering the Period:	
	From:	To:
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) -----	\$24,500.00	
(ii) Unitemized -----	\$ 1,437.00	
(iii) Total of contributions from individuals -----	\$25,937.00	\$25,937.00
(b) Political Party Committees -----	\$ 767.43	\$ 767.43
(c) Other Political Committees (such as PACs) -----	\$16,000.00	\$16,000.00
(d) The Candidate -----	- 0 -	- 0 -
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (ii), (b), (c) and (d)) -----	\$42,704.43	\$42,704.43
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----	- 0 -	- 0 -
13. LOANS:		
(a) Made or Guaranteed by the Candidate -----	- 0 -	- 0 -
(b) All Other Loans -----	- 0 -	- 0 -
(c) TOTAL LOANS (add 13(a) and (b)) -----	- 0 -	- 0 -
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----	- 0 -	- 0 -
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----	\$ 3,154.72	\$ 3,154.72
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----	\$45,859.15	\$45,859.15
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES -----	\$20,554.65	\$20,554.65
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES -----	- 0 -	- 0 -
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate -----	- 0 -	- 0 -
(b) Of All Other Loans -----	- 0 -	- 0 -
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----	- 0 -	- 0 -
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees -----	- 0 -	- 0 -
(b) Political Party Committees -----	- 0 -	- 0 -
(c) Other Political Committees (such as PACs) -----	- 0 -	- 0 -
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----	- 0 -	- 0 -
21. OTHER DISBURSEMENTS -----	\$ 4,575.00	\$ 4,575.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----	\$25,399.51	\$25,399.51

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$ 302,482.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$ 45,859.15
25. SUBTOTAL (add Line 23 and Line 24) -----	\$ 348,342.09
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$ 25,399.51
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$ 322,942.58

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 5
FOR LINE NUMBER 11a

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)

BORSKI FOR CONGRESS COMMITTEE (C00148429)

A. Full Name, Mailing Address and ZIP Code Michael Foley 1000 Faunce Street Phila., PA 19111		Name of Employer Occupation Retired	Date (month, day, year) 1/12/98	Amount of Each Receipt This Period \$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00		
B. Full Name, Mailing Address and ZIP Code Virginia M. Duffy 345 Peach Tree Drive Jenkintown, PA 19046		Name of Employer Occupation Self Attorney	Date (month, day, year) 2/18/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code William Piszek 905 Wooded Pond Road Ambler, PA 19002		Name of Employer Emlen House Enterprises Occupation Corporate Officer	Date (month, day, year) 2/20/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 2,000.00		
D. Full Name, Mailing Address and ZIP Code Dominick Cipollini P. O. Box 202 Cheltenham, PA 19012		Name of Employer Keystone Outdoor Advertising Occupation President	Date (month, day, year) 2/20/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,500.00		
E. Full Name, Mailing Address and ZIP Code Ronald Rubin 243 Conshohocken State Road Narberth, PA 19072		Name of Employer Self Occupation Entrepreneur	Date (month, day, year) 2/20/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code Connell Chris Cannon 334 Laurel Lane Haverford, PA 19041		Name of Employer Penn Diesel Corp. Occupation President	Date (month, day, year) 2/20/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,500.00		
G. Full Name, Mailing Address and ZIP Code Joseph Egan 247 Sycamore Circle Feasterville, PA 19053		Name of Employer Occupation	Date (month, day, year) 2/20/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,500.00		

SUBTOTAL of Receipts This Page (optional) \$6,250.00

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 2 OF 5
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

BORSKI FOR CONGRESS COMMITTEE (C00148429)

A. Full Name, Mailing Address and ZIP Code Edward Piszek 1901 E. Pennsylvania Avenue Fort Washington, PA 19034		Name of Employer Occupation Retired	Date (month, day, year) 2/20/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 2,000.00		
B. Full Name, Mailing Address and ZIP Code David Cohen, Esquire 7 West Sunset Avenue Philadelphia, PA 19118		Name of Employer Ballard Spahr Andrews & Ingersoll	Date (month, day, year) 2/27/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney & Chairman		
		Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code Meyer P. Potamkin 111 Presidential Blvd., Ste. 135 Bala Cynwyd, PA 19004		Name of Employer Boulevard Mortgage Co.	Date (month, day, year) 2/27/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President		
		Aggregate Year-to-Date > \$ 2,000.00		
D. Full Name, Mailing Address and ZIP Code Eugene Andruczyk 640 Pulinski Road Ivyland, PA		Name of Employer Self	Date (month, day, year) 2/27/98	Amount of Each Receipt This Period \$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Doctor		
		Aggregate Year-to-Date > \$ 450.00		
E. Full Name, Mailing Address and ZIP Code Dale Lintner, Sr. 1353 Revelation Road Meadowbrook, PA 19046		Name of Employer Self	Date (month, day, year) 2/27/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Construction		
		Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code John Reilly 251 W. Montgomery Ave., #12 Haverford, PA 19041		Name of Employer United Refrigeration	Date (month, day, year) 3/2/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President		
		Aggregate Year-to-Date > \$ 2,000.00		
G. Full Name, Mailing Address and ZIP Code Sportsmen's Ventures 12401 McNulty Road Phila., PA 19154		Name of Employer Partnership	Date (month, day, year) 3/2/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation		
		Aggregate Year-to-Date > \$ 1,500.00		

SUBTOTAL of Receipts This Page (optional)

\$6,250.00

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 9 OF 5
FOR LINE NUMBER 118

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NAME OF COMMITTEE (in Full)

BORSKI FOR CONGRESS COMMITTEE (CO0148429)

<p>A. Full Name, Mailing Address and ZIP Code William Graham IV 828 Conshohocken State Road Gladwyne, PA 19035</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self</p> <p>Occupation Insurance Agent</p> <p>Aggregate Year-to-Date > \$ 1,500.00</p>	<p>Date (month, day, year) 3/6/98</p>	<p>Amount of Each Receipt This Period \$1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Lori Kliner Krenzel 3600 Conshocken Avenue, Unit 1207 Phila., PA 19131</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 3/6/98</p>	<p>Amount of Each Receipt This Period \$1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Arsenal Associates P. O. Box 26767 Elkins Park, PA 19027</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Partnership</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 3/6/98</p>	<p>Amount of Each Receipt This Period \$1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Tony DePaul & Son 1750 Walton Road Blue Bell, PA 19422</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Partnership</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 3/6/98</p>	<p>Amount of Each Receipt This Period \$1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Lee Casper P. O. Box 3759 Phila., PA 19125</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self</p> <p>Occupation Homebuilder</p> <p>Aggregate Year-to-Date > \$ 750.00</p>	<p>Date (month, day, year) 3/13/98</p>	<p>Amount of Each Receipt This Period \$ 500.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Obermayer Rebmann Maxwell & Hippel Packard Building, 11th Floor Phila., PA 19102</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Partnership</p> <p>Occupation Law Firm</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 3/13/98</p>	<p>Amount of Each Receipt This Period \$1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Richard Rueda 8415 Envoy Avenue Phila., PA 19153</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer TransFreight System, Inc.</p> <p>Occupation CEO</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 3/16/98</p>	<p>Amount of Each Receipt This Period \$ 500.00</p>

SUBTOTAL of Receipts This Page (optional)

\$6,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 5

FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

BORSKI FOR CONGRESS COMMITTEE (C00148429)

A. Full Name, Mailing Address and ZIP Code Irwin Lee Gross 330 S. Warminster Road Hatboro, PA 19046	Name of Employer ICC Technology, Inc.	Date (month, day, year) 3/16/98	Amount of Each Receipt This Period \$1,000.00
	Occupation President	Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$		1,500.00	
B. Full Name, Mailing Address and ZIP Code Peter Hearn 123 S. Broad St. Phila., PA 19109	Name of Employer Self	Date (month, day, year) 3/16/98	Amount of Each Receipt This Period \$ 500.00
	Occupation Attorney	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$		500.00	
C. Full Name, Mailing Address and ZIP Code Terry Graboyes 708 Lombard Street Phila., Pa 19147	Name of Employer Self	Date (month, day, year) 3/16/98	Amount of Each Receipt This Period \$1,000.00
	Occupation Construction	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$		1,000.00	
D. Full Name, Mailing Address and ZIP Code Celestino Pennoni 411 Valley Glen Drive Bryn Mawr, PA 19010	Name of Employer Self	Date (month, day, year) 3/17/98	Amount of Each Receipt This Period \$ 500.00
	Occupation Civil Engineer	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$		500.00	
E. Full Name, Mailing Address and ZIP Code Mary Vassallo 984 Princess Drive Yardley, PA 19064	Name of Employer Homemaker	Date (month, day, year) 3/20/98	Amount of Each Receipt This Period \$1,000.00
	Occupation	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$		1,000.00	
F. Full Name, Mailing Address and ZIP Code Sandra Muller 1515 The Fairway, #478 W Rydal, PA 19046	Name of Employer Clement & Muller	Date (month, day, year) 3/23/98	Amount of Each Receipt This Period \$ 500.00
	Occupation Corporate Officer	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$		500.00	
G. Full Name, Mailing Address and ZIP Code William Giles 1755 N. Cedar Lane Villanova, PA 19085	Name of Employer Philadelphia Phillies	Date (month, day, year) 3/23/98	Amount of Each Receipt This Period \$1,000.00
	Occupation Corporate Officer	Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$		1,500.00	

SUBTOTAL of Receipts This Page (optional)

\$5,500.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BORSKI FOR CONGRESS COMMITTEE (C00148429)

A. Full Name, Mailing Address and ZIP Code William Lieberman 1311 Squirrel Hill Ave. Pittsburgh, PA 15217		Name of Employer Hilb Rogal & Hamilton	Date (month, day, year) 3/27/98	Amount of Each Receipt This Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Insurance Broker	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
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) \$ 500.00

TOTAL This Period (last page this line number only) \$ 24,500.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
BORSKI FOR CONGRESS COMMITTEE (C00148429)

A. Full Name, Mailing Address and ZIP Code Friends of Phil Grutzmacher 7730 Ferndale Street Phila., PA 19111 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date \$ 767.43	Date (month, day, year) 3/20/98	Amount of Each Receipt This Period \$767.43
B. 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
C. 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
D. 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
E. 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
F. 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
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)

TOTAL This Period (last page this line number only)

\$767.43

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (in Full)

BORSKI FOR CONGRESS COMMITTEE (COO148429)

A. Full Name, Mailing Address and ZIP Code Natl. Assn. of Retired Fed. Employees PAC 1533 New Hampshire Ave., NW Washington, DC 20036		Name of Employer PAC	Date (month, day, year) 1/6/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code U.A. Political Education Comm. 901 Massachusetts Ave., NW Washington, DC 20001		Name of Employer	Date (month, day, year) 1/6/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code Unite Campaign Committee 1710 Broadway New York, NY 10019		Name of Employer	Date (month, day, year) 1/12/98	Amount of Each Receipt This Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code Pilots Society PAC P. O. Box 906 Phila., Pa 19105		Name of Employer	Date (month, day, year) 2/18/98	Amount of Each Receipt This Period \$1,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date \$ 3,500.00	
E. Full Name, Mailing Address and ZIP Code Natl. Utility Contactors Assn. PAC 4301 Fairfax Drive Arlington, VA 22203		Name of Employer	Date (month, day, year) 2/20/98	Amount of Each Receipt This Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code SPD PAC 13500 Roosevelt Blvd. Phila., PA 19116		Name of Employer	Date (month, day, year) 3/6/98	Amount of Each Receipt This Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date \$ 2,000.00	
G. Full Name, Mailing Address and ZIP Code American Pilots Assn. PAC 499 S. Capitol St., SW #409 Washington, DC 20003		Name of Employer	Date (month, day, year) 3/6/98	Amount of Each Receipt This Period 2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date \$ 4,500.00	

SUBTOTAL of Receipts This Page (optional) \$8,500.00

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

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NAME OF COMMITTEE (in Full)
BORSKI FOR CONGRESS COMMITTEE (C00148429)

A. Full Name, Mailing Address and ZIP Code PAN Energy Corp PAC 5400 Westheimer Houston, TX 77050	Name of Employer Occupation	Date (month, day, year) 3/13/98	Amount of Each Receipt this Period \$ 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 Transportation Political Educ. League 14600 Detroit Avenue Lakewood, OH 44107	Name of Employer Occupation	Date (month, day, year) 3/20/98	Amount of Each Receipt this Period \$1,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 5,000.00		
C. Full Name, Mailing Address and ZIP Code Intntl. Union of Operating Engineers PAC Local 542 1375 Virginia Dr., Ste. 100 Ft. Washington, PA 19034	Name of Employer Occupation	Date (month, day, year) 3/20/98	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 2,000.00		
D. Full Name, Mailing Address and ZIP Code Atochem North America PAC 2000 Market Street Phila., PA 19103	Name of Employer Occupation	Date (month, day, year) 3/23/98	Amount of Each Receipt this Period \$1,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 2,000.00		
E. Full Name, Mailing Address and ZIP Code Crown Cork & Seal Co. PAC One Crown Way Phila., PA 19114	Name of Employer Occupation	Date (month, day, year) 3/23/98	Amount of Each Receipt this Period \$1,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 1,500.00		
F. Full Name, Mailing Address and ZIP Code American Maritime Officers 650 4th Street Brooklyn, NY 11232	Name of Employer Occupation	Date (month, day, year) 3/19/98	Amount of Each Receipt this Period \$2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 4000.00		
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) \$7,500.00

TOTAL This Period (last page this line number only) \$16,000.00

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NAME OF COMMITTEE (in Full)

BORSKI FOR CONGRESS COMMITTEE (C00148429)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Polonia Fed. Savings & Loan 2646 E. Allegheny Avenue Phila., PA 19134	Savings Account Interest	3/31/97	721.47
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code Vanguard Group P. O. Box 7800 Phila., PA 19101-9892	Name of Employer Money Market Dividends	3/31/98	2,433.25
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)

TOTAL This Period (last page this line number only)

\$3,154.72

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

BORSKI FOR CONGRESS COMMITTEE (COD148429)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Robert A. Borski 4015 Fittler Street Phila., PA 19114	Reimbursement of Expenses	1/5/98	162.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	1/29/98	37.80
	<input type="checkbox"/> Other (specify)	3/5/98	37.00
B. Full Name, Mailing Address and ZIP Code Robert A. Borski (continued)	Purpose of Disbursement Expense Reimbursement	Date (month, day, year) 3/17/98	Amount of Each Disbursement This Period 130.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
C. Full Name, Mailing Address and ZIP Code Kevin Gallagher 1037 Belfield Avenue Drexel Hill, PA 19026	Purpose of Disbursement Campaign Consultant	Date (month, day, year) 1/5/98	Amount of Each Disbursement This Period 1,670.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	2/10/98	1,670.00
	<input type="checkbox"/> Other (specify)	3/3/98	1,670.00
D. Full Name, Mailing Address and ZIP Code Kevin Gallagher 1037 Belfield Avenue Drexel Hill, PA 19026	Purpose of Disbursement Expense Reimbursement	Date (month, day, year) 1/16/98	Amount of Each Disbursement This Period 14.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	2/2/98	300.00
	<input type="checkbox"/> Other (specify)	2/20/98	21.25
E. Full Name, Mailing Address and ZIP Code Kevin Gallagher (continued)	Purpose of Disbursement Expense Reimbursement	Date (month, day, year) 3/2/98	Amount of Each Disbursement This Period 100.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3/3/98	112.22
	<input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code Joseph Michalski 3170 Aramingo Avenue Phila., PA 19134	Purpose of Disbursement Campaign Consultant	Date (month, day, year) 1/26/98	Amount of Each Disbursement This Period 1,000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	2/26/98	1,000.00
	<input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code Havertown Beverage 2208-1D Darby Road Havertown, PA 19087	Purpose of Disbursement Beverages for meeting on campaign strategy	Date (month, day, year) 2/13/98	Amount of Each Disbursement This Period 30.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3/16/98	90.00
	<input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code Staples, Inc. P. O. Box 30292 Salt Lake City, UT	Purpose of Disbursement Office supplies	Date (month, day, year) 1/7/98	Amount of Each Disbursement This Period 11.12
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3/2/98	269.86
	<input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code Torresdale Flower Shop 7430 Frankford Avenue Phila., PA 19136	Purpose of Disbursement Flowers	Date (month, day, year) 1/7/98	Amount of Each Disbursement This Period 31.57
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	2/17/98	100.59
	<input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

BORSKI FOR CONGRESS COMMITTEE (000148429)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. Postal Service 2970 Market Street Phila., PA 19104	Postage, Bulk Rates	1/7/98	160.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/2/98	85.00
B. Full Name, Mailing Address and ZIP Code U. S. Postal Service (continued)	Purpose of Disbursement Postage	Date (month, day, year) 3/9/98	Amount of Each Disbursement This Period 96.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/98	32.00
C. Full Name, Mailing Address and ZIP Code Bell Atlantic P. O. Box 8585 Phila., PA 19173	Purpose of Disbursement Phones	Date (month, day, year) 1/15/98	Amount of Each Disbursement This Period 3,500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/98	677.34
D. Full Name, Mailing Address and ZIP Code NewsGleaner Publications 1612 Margaret Street Phila., PA 19124	Purpose of Disbursement Advertisement	Date (month, day, year) 1/7/98	Amount of Each Disbursement This Period 50.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code St. Martin of Tours Society 5450 Roosevelt Blvd. Phila., PA 19124	Purpose of Disbursement Ad Booklet	Date (month, day, year) 1/13/98	Amount of Each Disbursement This Period 70.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code U. S. Capitol Historical Society 200 Maryland Ave., NE Washington, DC 20002	Purpose of Disbursement 1998 Calendars	Date (month, day, year) 1/13/98	Amount of Each Disbursement This Period 1,000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code David Andrukitis, Inc. 50 E Street, SE Washington, DC 20003	Purpose of Disbursement Printing Services	Date (month, day, year) 1/13/98	Amount of Each Disbursement This Period 160.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code Fishtown Lady Kixx 2212 E. Huntingdon Street Phila., PA 19125	Purpose of Disbursement Advertisement	Date (month, day, year) 1/14/98	Amount of Each Disbursement This Period 100.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code Star Publications 250 W. Girard Avenue Phila., PA 19123	Purpose of Disbursement Advertisement	Date (month, day, year) 1/14/98	Amount of Each Disbursement This Period 120.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

BORSKI FOR CONGRESS COMMITTEE (C00148429)

<p>A. Full Name, Mailing Address and ZIP Code Northeast Breeze 54 Park Avenue Rockledge, PA 19046</p>	<p>Purpose of Disbursement Advertisement</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 1/14/98</p>	<p>Amount of Each Disbursement This Period 20.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Wintergreen Conference Center P. O. Box 706 Wintergreen, VA 22958</p>	<p>Purpose of Disbursement Democratic Conference Expenses</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 1/15/98</p>	<p>Amount of Each Disbursement This Period 590.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Bridesburg Bulletin 4449 Garden Street Phila., PA 19137</p>	<p>Purpose of Disbursement Advertisement</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 1/16/98</p>	<p>Amount of Each Disbursement This Period 50.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Sgt. Butler Memorial Fund c/o Master Sft. Michael Guzman 105 E. Yeager Blvd Edwards AFB, CA 93524</p>	<p>Purpose of Disbursement Memorial Fund Donation</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 1/20/98</p>	<p>Amount of Each Disbursement This Period 100.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Sylvester Management Corporation Washington, DC</p>	<p>Purpose of Disbursement FEC Conference</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 1/26/98</p>	<p>Amount of Each Disbursement This Period 175.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Aramark 1 Corestates Complex Phila., PA 19148</p>	<p>Purpose of Disbursement Campaign Meeting Costs</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 2/2/98</p>	<p>Amount of Each Disbursement This Period 394.48</p>
<p>G. Full Name, Mailing Address and ZIP Code Congressional Hunger Center 229 1/2 Pennsylvania Ave., SE Washington, DC 20003</p>	<p>Purpose of Disbursement Donation</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 2/13/98</p>	<p>Amount of Each Disbursement This Period 100.00</p>
<p>H. Full Name, Mailing Address and ZIP Code St. Joan of Arc 3546 Frankford Avenue Phila., PA 19134</p>	<p>Purpose of Disbursement Memorial Fund in honor Sarah Egan</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 2/13/98</p>	<p>Amount of Each Disbursement This Period 100.00</p>
<p>I. Full Name, Mailing Address and ZIP Code Leukemia Society Pennsylvania Ave., Ste. 2D Phila., PA 1913D</p>	<p>Purpose of Disbursement Memorial Fund</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 2/13/98</p>	<p>Amount of Each Disbursement This Period 100.00</p>

SUBTOTAL of Disbursements This Page (optional)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

BORSKI FOR CONGRESS COMMITTEE (C00148429)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Nazareth Academy Parents Assn. 4001 Grant Avenue Phila., PA 19114-2999	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/13/98	75.00
Frankford Boys Club 1357 Pratt Street Phila., PA 19124	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/13/98	100.00
Leprechauns Sports Assn. 2973 Gaul Street Phila., PA 19134	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/13/98	100.00
Scott Florist 5722 Frankford Avenue Phila., PA 19135	Flowers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/17/98	48.09
Holmesburg Boys Club P. O. Box 39026 Phila., PA 19136	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/17/98	70.00
Friends of Action Alliance 35 S. 4th St., Phila., PA 19106	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/17/98	75.00
Officer Boyle Scholarship Fund P. O. Box 11511 Phila., PA 19116	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/17/98	65.00
Vinnie Imbrenda Fund 2011 Harrel Avenue Phila., PA 19152	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/17/98	100.00
St. Leo's Council #1294 KOC 6379 Marsden Street Phila., PA 19135	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/17/98	40.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

BORSKI FOR CONGRESS COMMITTEE (COO148429)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Park Hyatt at the Bellevue Broad & Walnut Streets Phila., PA 19102	Deposit Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/17/98	500.00
B. Full Name, Mailing Address and ZIP Code Cash P. O. Box 26846 Phila., PA 19134	Purpose of Disbursement Petty Cash Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/24/98 3/2/98	Amount of Each Disbursement This Period 120.00 150.00
C. Full Name, Mailing Address and ZIP Code PA Assn. of Notaries 14 Wood Street Pittsburgh, PA 15222	Purpose of Disbursement Office Notary Renewal Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/24/98	Amount of Each Disbursement This Period 205.49
D. Full Name, Mailing Address and ZIP Code American Cancer Society 1626 Locust Street Phila., PA 19103	Purpose of Disbursement In memory of Ruth Chamow Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/2/98	Amount of Each Disbursement This Period 50.00
E. Full Name, Mailing Address and ZIP Code Somerton Civic Memorial Day Parade 1114 Warwick Street Phila., PA 19116	Purpose of Disbursement Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/3/98	Amount of Each Disbursement This Period 100.00
F. Full Name, Mailing Address and ZIP Code Fr. Judge H.S. Mothers Assn. 3301 Solly Avenue Phila., PA 19136	Purpose of Disbursement Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/6/98	Amount of Each Disbursement This Period 50.00
G. Full Name, Mailing Address and ZIP Code Casino Deli 2425 Welsh Road Phila., PA 19114	Purpose of Disbursement Campaign Meeting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/9/98	Amount of Each Disbursement This Period 83.46
H. Full Name, Mailing Address and ZIP Code Oiney Midget & Teen League P. O. Box 5734 Phila., PA 19120	Purpose of Disbursement Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/13/98	Amount of Each Disbursement This Period 100.00
I. Full Name, Mailing Address and ZIP Code RSVP East 6600 Eustleton Ave. Phila., PA 19149	Purpose of Disbursement Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/13/98	Amount of Each Disbursement This Period 125.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

BORSKI FOR CONGRESS COMMITTEE (CO0148429)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Temple Sholom Large St. & Roosevelt Blvd. Phila. PA 19149	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/13/98	100.00
HMS Ventures Pier 34 - Columbus Blvd. Phila., PA 19147	Deposit Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/16/98	500.00
Katrina Natale 2113 McKinley Street Phila., PA 19149	Scholarship Fund Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/98	100.00
Ryan Anthony Nase 1712 Faunce Street Phila., PA 19111	Scholarship Fund Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/98	100.00
Knights of Columbus Council 578 200 E. Tioga Street Philad. PA 19134	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/98	60.00
PAL Golf Tournament L & Cayuga Sts. Phila., PA 19124	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/98	100.00
Lawncrest Lightning 4220 Castor Avenue Phila., PA 19124	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/98	100.00
Friends of Fleuhr Park at Eden Hall P. O. Box 63045 Phila., PA 19114	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/98	50.00
KAN/KARF 3023 Frankford Avenue Phila., PA 19134	Reception Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/98	50.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 7 OF 7
FOR LINE NUMBER 17

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

NAME OF COMMITTEE (In Full)

BORSKI FOR CONGRESS COMMITTEE (C00148429)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Democratic Club 30 Ivy Street, SE Washington, DC 20003	Campaign Meeting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	430.65
B. Full Name, Mailing Address and ZIP Code Ladies Ancient of Hibernians Belgrade Street Philadelphia, PA 19134	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	100.00
C. Full Name, Mailing Address and ZIP Code Kennedy Printing 5534 Baltimore Avenue Phila., PA 19143	Printing for campaign Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	469.73
D. Full Name, Mailing Address and ZIP Code North Catholic H.S. Music Program Torresdale & Kensington Aves. Phila., PA 19124	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	100.00
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)

TOTAL This Period (last page this line number only)

\$20,554.65

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

BORSKI FOR CONGRESS COMMITTEE (C00148429)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Lois Capps 25 W. Anapamu St. Santa Barbara, CA 93101	Campaign Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/13/98	\$1,000.00
Friends of Lane Evans P. O. Box 5263 Rock Island, IL 61201	Campaign Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/13/98	\$1,000.00
Casey for Congress 254 Wyoming Avenue Scranton, PA 18503	Campaign Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/23/98	\$1,000.00
Brady for Congress 1421 Walnut Street Phila., PA 19102	Campaign Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	\$1,000.00
Friends of the 56th Ward 7408 Rising Sun Avenue Phila., PA 19111	Ad Booklet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/13/98	75.00
Second Ward Democratic Club 951 Passyunk Avenue Phila., PA 19147	Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/98	500.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$4,575.00

LOANS

Name of Committee (In Full)
BORSKI FOR CONGRESS COMMITTEE (C00148429)

A. Full Name, Mailing Address and ZIP Code of Loan Source Committee to Elect Bill Stinson 3951 "L" Street Philadelphia, PA 19124	Original Amount of Loan \$10,000.00	Cumulative Payment To Date - 0 -	Balance Outstanding at Close of This Period \$10,000.00
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Special Election			

Terms: Date Incurred 10/26/93 Date Due None Interest Rate 0 % (apr) Secured NO

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: \$		
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 Friends to Elect Christine Tartaglione 1407 Vankirk Street Philadelphia, PA 19149	Original Amount of Loan \$10,000.00	Cumulative Payment To Date - 0 -	Balance Outstanding at Close of This Period \$10,000.00
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			

Terms: Date Incurred 10/25/94 Date Due None Interest Rate 0 % (apr) Secured NO

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		

SUBTOTALS This Period This Page (optional)	\$20,000.00
TOTALS This Period (last page in this line only)	\$20,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 4-15-98
<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>fel</i> PREPARER	4-19-98 DATE PREPARED