

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

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FEC MAIL ROOM

2000 JUL 17 P 2:38

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) MASCARA FOR CONGRESS		2. FEC IDENTIFICATION NUMBER C00263236
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. P.O. BOX 1109		
CITY, STATE and ZIP CODE WASHINGTON, PA 15301	STATE/DISTRICT PA/20	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

April 15 Quarterly Report 12-Day Pre-Election Report for the _____ (Type of Election)
election on _____ in the State of _____

July 15 Quarterly Report 30-Day Post-Election Report following the General Election
on _____ in the State of _____

October 15 Quarterly Report Termination Report

January 31 Year End Report

July 31 Mid-Year Report (Non-election Year Only)

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

SUMMARY

5. Covering Period <u>04-01-00</u> through <u>06-30-00</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))	30,100.00	116,341.35
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	30,100.00	116,341.35
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	37,091.87	144,109.82
(b) Total Offsets to Operating Expenditures (from Line 14)	60.00	60.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	37,031.87	144,049.82
8. Cash on Hand at Close of Reporting Period (from Line 27)	130,860.97	For further information contact: Federal Election Commission 900 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule G and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule G and/or Schedule D)	0	

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

Type or Print Name of Treasurer EDWARD MENDOLA	Date
Signature of Treasurer <i>Edward Mendola</i>	07-15-00

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)

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (In full) MASCARA FOR CONGRESS	Report Covering the Period: From: 04-01-00 To: 06-30-00	
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) -----	2,000.00	
(ii) Unitemized -----	200.00	
(iii) Total of contributions from individuals -----	2,200.00	29,675.00
(b) Political Party Committees -----	0	1,516.35
(c) Other Political Committees (such as PACs) -----	27,900.00	85,150.00
(d) The Candidate -----		
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) -----	30,100.00	116,341.35
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate -----		
(b) All Other Loans -----		
(c) TOTAL LOANS (add 13(a) and (b)) -----	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----	60.00	60.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----	0	0
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----	30,160.00	116,401.35
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES -----	37,091.87	144,109.82
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES -----	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate -----		
(b) Of All Other Loans -----		
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees -----		
(b) Political Party Committees -----		
(c) Other Political Committees (such as PACs) -----		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----	0	0
21. OTHER DISBURSEMENTS -----	3,000.00	3,000.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----	40,091.87	147,109.82
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$ 140,792.84	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$ 30,160.00	
25. SUBTOTAL (add Line 23 and Line 24) -----	\$ 170,952.84	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$ 40,091.87	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$ 130,860.97	

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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

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

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)

Mascara for Congress C00263236

A. Full Name, Mailing Address and ZIP Code Robert E. Brant 4013 Greystone Drive Morgantown, WV 26505	Name of Employer Brant Motorsports	Date (month, day, year) 5/11/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Owner	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Robert E. Eberly P.O. Box 2023 Uniontown, PA 15401-1623	Name of Employer Eberly Foundation	Date (month, day, year) 5/2/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Director	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$2,000.00
TOTAL This Period (last page this line number only)			\$2,000.00

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Other Political Committees

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

PAGE 1 OF 4
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Mascara for Congress C00263236

A. Full Name, Mailing Address and ZIP Code American Optometric Association PAC 1505 Prince Street Suite 300 Alexandria, VA 22314	Name of Employer Occupation	Date (month, day, year) 5/30/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code ARTBA PAC American Road & Transportation Builders Association PAC Washington, DC 20024	Name of Employer Occupation	Date (month, day, year) 4/10/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code Build PAC of the National Association of Home Builders 1201 15th Street N.W. Washington, DC 20005-2800	Name of Employer Occupation	Date (month, day, year) 4/10/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code COALPAC A.P.A.C. of the National Mining Association 1130 17th Street Washington, DC 20036	Name of Employer Occupation	Date (month, day, year) 4/10/00	Amount of Each Receipt this Period \$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 Committee on Letter Carriers Political Education Letter Carriers Political Action Fund 100 Indiana Avenue, N.W. Washington, DC 20001	Name of Employer Occupation	Date (month, day, year) 5/30/00	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 > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code Committee on Political Action of the American Postal Workers Union, AFL-CIO 1300 L Street, N.W. Washington, DC 20005	Name of Employer Occupation	Date (month, day, year) 6/30/00	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 > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code Credit Suisse First Boston Corporation Government Action Fund Washington, DC 20038-3308	Name of Employer Occupation	Date (month, day, year) 4/20/00	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 > \$ 1,000.00		

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

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Other Political Committees

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

PAGE 2 OF 4

FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (in Full)

Mascara for Congress C00263238

A. Full Name, Mailing Address and ZIP Code CWA Local 13000 PAC Fund 2124 Race Street Philadelphia, PA 19103	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6/26/00	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$5,000.00	
B. Full Name, Mailing Address and ZIP Code Dealers Election Action Committee of the National Automobile Dealers Association (NADA) McLean, VA 22102	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	5/23/00	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$2,000.00	
C. Full Name, Mailing Address and ZIP Code Ernst & Young Political Action Committee 1225 Connecticut Avenue, N.W. Washington, DC 20036-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6/30/00	\$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	
D. Full Name, Mailing Address and ZIP Code Federal Express Corporation PAC 2005 Corporate Avenue Memphis, TN 38132	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	5/5/00	\$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	
E. Full Name, Mailing Address and ZIP Code International Brotherhood of Boilermakers In Sp Bldrs, Bkmtks, Frgrs & Hlprs-Ed Fund 753 State Avenue Suite 585 Kansas City, KS 66101	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	4/17/00	\$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	
F. Full Name, Mailing Address and ZIP Code MCI Worldcom, Inc. PAC 500 Clinton Center Drive Building 2, 4th Floor Clinton, MS 39056-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6/30/00	\$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 National Stone Association StonePAC 1415 Elioit Place N.W. Washington, DC 20007-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	4/17/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$500.00	

SUBTOTAL of Receipts This Page (optional)

\$11,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Other Political Committees

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

PAGE 3 OF 4
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Mascara for Congress C00263238

A. Full Name, Mailing Address and ZIP Code Norfolk Southern Corporation Good Government Fund Three Commercial Place Norfolk, VA 23510-2191	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/30/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code RAG American Coal Holding Inc. Political Action Committee P.O. Box 461224 Aurora, CO 80045-	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/5/00	Amount of Each Receipt this Period \$900.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 900.00		
C. Full Name, Mailing Address and ZIP Code SMACCPAC Sheet Metal and Air Conditioning Contractors Political Action Committee Chantilly, VA 22022-1230	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/2/00	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 > \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code Transport Workers Union Political Contributions Committee 80 West End Avenue New York, NY 10023	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 4/20/00	Amount of Each Receipt this Period \$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 Union of Needletrades, Industrial and Textile Employees, AFL-CIO, CLC (Unite) Philadelphia, PA 19103-	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/30/00	Amount of Each Receipt this Period \$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 United Airlines, Inc. Political Action Committee P.O. Box 66423 Chicago, IL 60666-	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6/30/00	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 > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code United Steelworkers of America Political Action Fund 5 Gateway Center Pittsburgh, PA 15222-	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 4/28/00	Amount of Each Receipt this Period \$5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		

SUBTOTAL of Receipts This Page (optional)	\$9,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Other Political Committees

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

PAGE 4 OF 4
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Mascara for Congress C00263236

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
United Transportation Union (UTU) Transportation Political Education League 14800 Detroit Avenue Cleveland, OH 44107		5/2/00	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
UPSPAC 55 Glenlake Parkway, N.E. Atlanta, GA 30328		4/10/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	\$1,500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
UPSPAC 55 Glenlake Parkway, N.E. Atlanta, GA 30328		4/10/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	\$1,500.00
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)	\$2,000.00
TOTAL This Period (last page this line number only)	\$27,900.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 7
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)

Mascara for Congress C00263236

A. Full Name, Mailing Address and ZIP Code \$200 Or Less	Purpose of Disbursement \$200 or less Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/30/00	Amount of Each Disbursement This Period \$3,086.23
B. Full Name, Mailing Address and ZIP Code 10th District Democratic Club 310 Euclid Street, Suite 10 Mount Clemens, MI 48043	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/26/00	Amount of Each Disbursement This Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Airport Area Development Corporation 155 Ridgewood Road Coraopolis, PA 15108	Purpose of Disbursement Advertisement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/8/00	Amount of Each Disbursement This Period \$450.00
D. Full Name, Mailing Address and ZIP Code AT & T P.O. BOX 27-866 Kansas City, MO 64184-0866	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/23/00	Amount of Each Disbursement This Period \$14.09
E. Full Name, Mailing Address and ZIP Code AT & T P.O. BOX 27-866 Kansas City, MO 64184-0866	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/3/00	Amount of Each Disbursement This Period \$276.48
F. Full Name, Mailing Address and ZIP Code AT & T P.O. BOX 27-866 Kansas City, MO 64184-0866	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/25/00	Amount of Each Disbursement This Period \$9.74
G. Full Name, Mailing Address and ZIP Code AT & T P.O. BOX 27-866 Kansas City, MO 64184-0866	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/1/00	Amount of Each Disbursement This Period \$185.56
H. Full Name, Mailing Address and ZIP Code AT & T P.O. BOX 27-866 Kansas City, MO 64184-0866	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/2/00	Amount of Each Disbursement This Period \$126.00
I. Full Name, Mailing Address and ZIP Code AT & T P.O. BOX 27-866 Kansas City, MO 64184-0866	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/30/00	Amount of Each Disbursement This Period \$18.67

SUBTOTAL of Disbursements This Page (optional)

\$5,168.77

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 2 OF 7
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)

Mascara for Congress C00263236

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell Atlantic P.O. Box 2800 Lehigh Valley, PA 18002-8000	Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/00	\$76.60
Bell Atlantic P.O. Box 2800 Lehigh Valley, PA 18002-8000	Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/14/00	\$99.21
Bell Atlantic P.O. Box 2800 Lehigh Valley, PA 18002-8000	Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$69.14
Bell Atlantic P.O. Box 2800 Lehigh Valley, PA 18002-8000	Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/16/00	\$72.36
Cantrell/Cutter Printing, Inc. 1769 Olive Street Capital Heights, MD 20743	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/16/00	\$1,184.40
Carmichaels/Cumberland Township Volunteer Fire Company R.D. 1 Box 318-E Carmichaels, PA 15320	Donation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/5/00	\$470.00
Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003	Membership dues Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/00	\$10,000.00
Democratic National Committee 430 South Capitol Street S.E. Washington, DC 20003	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/24/00	\$1,000.00
The Evergreen Fund P.O. Box 75214 Washington, DC 20013	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/28/00	\$1,000.00

SUBTOTAL of Disbursements This Page (optional)

\$13,971.71

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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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)			
Mascara for Congress C00263236			
A. Full Name, Mailing Address and ZIP Code Fraicoll/Siggins 80 F Street NW 804 Washington, DC 20001	Purpose of Disbursement Political Consultant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/7/00	Amount of Each Disbursement This Period \$1,540.00
B. Full Name, Mailing Address and ZIP Code Fraicoll/Siggins 80 F Street NW 804 Washington, DC 20001	Purpose of Disbursement Political Consultant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/2/00	Amount of Each Disbursement This Period \$1,557.70
C. Full Name, Mailing Address and ZIP Code Fraicoll/Siggins 80 F Street NW 804 Washington, DC 20001	Purpose of Disbursement Political Consultant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/3/00	Amount of Each Disbursement This Period \$983.19
D. Full Name, Mailing Address and ZIP Code Frank R. Mascara 831 Lincoln Avenue Charleroi, PA 15022	Purpose of Disbursement Travel & meal reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/1/00	Amount of Each Disbursement This Period \$382.23
E. Full Name, Mailing Address and ZIP Code Frank R. Mascara 831 Lincoln Avenue Charleroi, PA 15022	Purpose of Disbursement Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/11/00	Amount of Each Disbursement This Period \$29.37
F. Full Name, Mailing Address and ZIP Code Frank R. Mascara 831 Lincoln Avenue Charleroi, PA 15022	Purpose of Disbursement Travel reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/14/00	Amount of Each Disbursement This Period \$800.39
G. Full Name, Mailing Address and ZIP Code Frank R. Mascara 831 Lincoln Avenue Charleroi, PA 15022	Purpose of Disbursement Travel reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/1/00	Amount of Each Disbursement This Period \$763.38
H. Full Name, Mailing Address and ZIP Code Fields Of Heather 237 Mckean Avenue Charleroi, PA 15022	Purpose of Disbursement Flowers Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/3/00	Amount of Each Disbursement This Period \$200.34
I. Full Name, Mailing Address and ZIP Code Fields Of Heather 237 Mckean Avenue Charleroi, PA 15022	Purpose of Disbursement Flowers Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/2/00	Amount of Each Disbursement This Period \$101.76
SUBTOTAL of Disbursements This Page (optional)			\$6,158.36
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	OF
	4	7
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 committees.

NAME OF COMMITTEE (in Full)			
Mascara for Congress C00263236			
A. Full Name, Mailing Address and ZIP Code Fields Of Heather 237 Mckean Avenue Charleroi, PA 15022	Purpose of Disbursement Flowers Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/15/00	Amount of Each Disbursement This Period \$83.74
B. Full Name, Mailing Address and ZIP Code Fields Of Heather 237 Mckean Avenue Charleroi, PA 15022	Purpose of Disbursement Flowers Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/7/00	Amount of Each Disbursement This Period \$126.14
C. Full Name, Mailing Address and ZIP Code House Democratic Campaign Committee P O Box 555 Harrisburg, PA 17108	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/31/00	Amount of Each Disbursement This Period \$500.00
D. Full Name, Mailing Address and ZIP Code Italian American Society 108 Cavasna Drive Canonsburg, PA 15317	Purpose of Disbursement Dinner tickets Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/3/00	Amount of Each Disbursement This Period \$250.00
E. Full Name, Mailing Address and ZIP Code Louis Lignelli 323 Stonebrook Drive McMurray, PA 15317	Purpose of Disbursement Travel expenses Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/16/00	Amount of Each Disbursement This Period \$536.00
F. Full Name, Mailing Address and ZIP Code Pierre Lull 24 Willow Drive Monessen, PA 15062	Purpose of Disbursement Outdoor advertising Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/17/00	Amount of Each Disbursement This Period \$3,900.54
G. Full Name, Mailing Address and ZIP Code Lydic Printing 33 Springfield Avenue Washington, PA 15301	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/10/00	Amount of Each Disbursement This Period \$199.70
H. Full Name, Mailing Address and ZIP Code Lydic Printing 33 Springfield Avenue Washington, PA 15301	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/8/00	Amount of Each Disbursement This Period \$223.81
I. Full Name, Mailing Address and ZIP Code Maple Creek Distributors, Inc. P.O. Box 24 158 Lincoln Avenue Extension Charleroi, PA 15022	Purpose of Disbursement Reception Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/5/00	Amount of Each Disbursement This Period \$273.46
SUBTOTAL of Disbursements This Page (optional)			\$8,096.41
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 5 OF 7
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)

Mascara for Congress C00263236

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Edward Mendola P.O. 983 Belle Vernon, PA 15012	Accounting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/28/00	\$500.00
B. Full Name, Mailing Address and ZIP Code National Democratic Club 30 Ivy Street Se Washington, DC 20003	Club charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/19/00	\$275.30
C. Full Name, Mailing Address and ZIP Code National Democratic Club 30 Ivy Street Se Washington, DC 20003	Club charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/00	\$227.18
D. Full Name, Mailing Address and ZIP Code National Democratic Club 30 Ivy Street Se Washington, DC 20003	Club charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/7/00	\$182.03
E. Full Name, Mailing Address and ZIP Code NGP Software 5440 Nevada Avenue NW 3rd Floor Washington, DC 20015	Software Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/00	\$500.00
F. Full Name, Mailing Address and ZIP Code Joe Pintola 227 South Main Street Washington, PA 15301	Catering Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/10/00	\$500.00
G. Full Name, Mailing Address and ZIP Code Charlotte Sypula 132 Laddie Drive Washington, PA 15301	Filming Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/5/00	\$350.00
H. Full Name, Mailing Address and ZIP Code U.S. Postmaster Washington, PA 15301-9998	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/27/00	\$11.75
I. Full Name, Mailing Address and ZIP Code U.S. Postmaster Washington, PA 15301-9998	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/18/00	\$11.75

SUBTOTAL of Disbursements This Page (optional)

\$2,558.01

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 6 OF 7
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)

Maccara for Congress CD0263236

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Washington, PA 15301-9998	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/12/00	\$99.00
B. Full Name, Mailing Address and ZIP Code U.S. Postmaster Washington, PA 15301-9998	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/20/00	\$198.00
C. Full Name, Mailing Address and ZIP Code U.S. Postmaster Washington, PA 15301-9998	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/23/00	\$132.00
D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Washington, PA 15301-9998	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/23/00	\$396.00
E. Full Name, Mailing Address and ZIP Code U.S. Postmaster Washington, PA 15301-9998	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/12/00	\$165.00
F. Full Name, Mailing Address and ZIP Code Unitas Photography 314 East McMurray Road McMurray, PA 15317	Photographs Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/10/00	\$742.00
G. Full Name, Mailing Address and ZIP Code Wal-Mart 100 Sara Wat Belle Vernon, PA 15012	Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/19/00	\$12.12
H. Full Name, Mailing Address and ZIP Code Wal-Mart 100 Sara Wat Belle Vernon, PA 15012	Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/00	\$261.79
I. Full Name, Mailing Address and ZIP Code Washington Bar & Restaurant Supply Co. 144 South Main Street Washington, PA 15301	Reception supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/5/00	\$333.70

SUBTOTAL of Disbursements This Page (optional)

\$2,339.61

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 7 OF 7
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)

Mascara for Congress C00263236

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Washington Trades & Labor Inc. One South College Street Washington, PA 15301	Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/30/00	\$200.00
B. Full Name, Mailing Address and ZIP Code Washington Trades & Labor Inc. One South College Street Washington, PA 15301	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00	\$200.00
C. Full Name, Mailing Address and ZIP Code Westmoreland County Democratic Committee 14 E Otterman Street Greensburg, PA 15601	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/31/00	\$400.00
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)	\$800.00
TOTAL This Period (last page this line number only)	\$37,091.87

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21

Other Disbursements

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

NAME OF COMMITTEE (in Full)

Mascara for Congress C00263236

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Banior for Congress 237 South Gratiot Mount Clemens, MI 48043	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/26/00	\$1,000.00
B. Full Name, Mailing Address and ZIP Code Klink for U.S. Senate P.O. Box 15491 Pittsburgh, PA 15237	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/5/00	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Van Home for Congress P.O. Box 444 New Kensington, PA 15068	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/11/00	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	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	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	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	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	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	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)	\$3,000.00
TOTAL This Period (last page this line number only)	\$3,000.00

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 (R/C) 7-14-00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>SM</i> PREPARER	7-17-00 DATE PREPARED