Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	on 7900	364				ported E		CAND	IDATE		СОМ	4ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candida	ate or L	obbyist:		HEA	LTH	l ALLI	ANCE PO	DLITICA	AL AC	TION C	OMMITI	EE				
Street Address:	4750 LINDLE	RD PO I	BX 8600														
City:	HARRISBURG							State:	PA			Zip Code: 17105-8600					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA		POST-	3.		AMENDM REPORT?		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	y pri	≣-	5.	30 DA		POST-	6.		TERMINA REPORT?		Yes	No	•	/
report type)	ANNUAL REPORT	7.	Year 2000					NG METH CHECK O				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candidat	te:	•					DATE (OF ELECTION District Number Code						ty Code	Coun	
								МО	DAY	YE	AR	Number	code			coue	
								11		7	2000		(SEE IN	ISTRUCTIO	ONS FOR O	ODES)	,
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		1 1		1	Т	0	2	2	14	2000						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$	_		24,7	766.05						
B. Total Monet	ary Contributions A	And Rec	eipts (From	Sche	dule	: I)	\$			1,7	748.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			26,5	514.05						
D. Total Expen	ditures (From Sch	edule II	I)				\$			8,3	65.00						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$			18,1	49.05]					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II	()	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	')			\$				0.00			•			
				AFF	IDA	٩VI	T SE	CTION									
PART I - If this is	s a Committee repo	ort, trea	surer sign	here.	If th	is is	a Car	ndidate r	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sc	hedule	s file	d on	paper	or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	1e
Sworn to and subs	cribed before me this day of	•	20							S	ignature	of Perso	n Submit	ting Rep	ort		_
			_				<u>-</u>					Prin	ted Name	e			_
My Commission Ex	Signatu kpires	re										Ema	il				-
	МО	D	AY	YR			-		Are	ea Cod	le	Daytim	e Telepi	hone Nu	mber		_
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of med.	ny knowle	edge and beli	ef this	polit	tical	comm	ittee has ı	not viola	ted an	y provisi	ions of the	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this										Si	ignature o	of Candid	late			-
	day of ————————————————————————————————————						_					Duinta	d Name				-
	Signature						_					Printe	d Name				
My Commission Exp	_											Ema	il				- <u> </u>
	МО	D	AY	YR	ł		-		Area	Code		Da	aytime T	elephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
HEALTH ALLIANCE POLITICAL ACTION COMMITTEE	From:	To:	2/14/2000
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reportin	g Period (1)	\$	988.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)			
Contributions Received From Political Committees (Part A)		\$	0.00
All Other Contributions (Part B)	\$	360.00	
TOTAL for the Reportin	g Period (2)	\$	360.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			
Contributions Received From Political Committees (Part C)		\$	0.00
All Other Contributions (Part D)		\$	400.00
TOTAL for the Reportin	g Period (3)	\$	400.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reportin	g Period (4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add at totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa		\$	1,748.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candida	te	1	Reporting	Period			
		1	From:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee or Candida	te		Rep	orting Pe	eriod			
HEALTH ALLIANCE POLITICAL ACTIC	N COMMITTEE		Fro	m:		To):	2/14/2000
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
GEORGE VALKO MD					27.1.			
Mailing Address 111 SOUTH 11TH S	STREET						\$	80.00
City PHILADELPHIA	State	Zip Code (Plus 4)	1	19	2000		
	PA	191075096						
Full Name of Contributor				мо	DAY	YEAR		
JAMES COLLINS						12/11		
Mailing Address 4800 FRINDSHIP A	VENUE						\$	200.00
City PITTSBURGH	State	Zip Code (Plus 4)	1	19	2000		
	PA	152241722						
Full Name of Contributor				мо	DAY	YEAR		
TERESA FEDELE				140	DAI	ILAK		
Mailing Address 100 SOUTH JACKS	ON AVENUE						\$	80.00
City PITTSBURGH	State	Zip Code (Plus 4)	1	19	2000		
	PA	152023428						

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL \$ 360.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Cai	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		Þ	AMOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							*	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	n Schedule I, Detaile	d Summary Pa	age, Sectio	n 3.			\$	0.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name	of Filing Committee or Candidate				Rep	orting Pe	riod				
HEAL	TH ALLIANCE POLITICAL ACTION	COMMITTEE			Fron	n:		Т	o:	<u>2/</u>	14/200 <u>0</u>
						D#	ATE			AMOUN	NT
Full N	ame of Contributor					мо	DAY	YEAR		\$	400.00
LORE	ITA MCLAUGHLIN						27.1.			Þ	400.00
Mailin	g Address 1513 RACE STREET] 1	19	200	ا ۱		
City	PHILADELPHIA	State	Zi	p Code (Plus	4)]	15	200	۱ ٔ		
		PA	19	9102							
Emplo	yer Name MAGEE REHABILITATI	ON HOSP				Occupat	ion	EXEC \	/P8	CHIEF OP	ER\$\$\$
Emplo	yer Mailing Address/Principal Plac	e of Business		City			State		Z	ip Code (Pl	us 4)
1513	RACE STREET			PHILADEL	PHIA		PA		1	9102	
Enter	Grand Total of Part C on Sche	dule I. Detailed Si	ımr	marv Page.	Section	on 3.		Ī		PAGE '	TOTAL
		,		, . 					\$		400.00

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee	or Candidate		Report	ing Peri	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)				
Receipt Description	•	•			•		
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C				PAGE TOTAL
Enter Grand Total of Part	c on scnedule 1, Detailed	i Summary Page,	Section	4.			\$ 0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
HEALTH ALLIANCE POLITICAL ACTION COMMITTEE	From:	То:	<u>2/14/2000</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g Period				
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	orting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	V	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	Contributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.	,									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period		
HEALTH ALLIANCE POLITICAL ACTION COMMITTEE	From	То:	2/14/2000

				DATE		AMOUNT		
To Whom Paid			мо	DAY	YEAR			
REELECT CORNELL COMMITTEE			1-10					
Mailing Address 255 EAST MONTGO	MERY AVENUE		1	10	2000	\$	500.00	
City HATBORO	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19040	ROY CO	RNELL STA	ATE HOUS	SE REP 152N	ID PA	
To Whom Paid			мо	DAY	YEAR			
WALKO FOR STATE LEGISLATOR			1-10		12/11			
Mailing Address 97 WATSON BOULE	VARD		1	10	2000	\$	150.00	
City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	15214	DON W	ALKO STAT	E HOUSE	REP 20TH F	PA	
To Whom Paid			мо	DAY	YEAR			
FRIENDS OF SUSAN LAUGHLIN COMMI	TTEE							
Mailing Address 1305 SAMPSON STR	EET		1	10	2000	\$	250.00	
City CONWAY State Zip Code (Plus 4				tion of Exp	enditure			
	PA	15027	SUSAN	LAUGHLIN	STATE H	OUSE REP 1	6TH PA	
To Whom Paid			мо	DAY	YEAR			
FRED A TRELLO FOR STATE REPRESENT	ΓΑΤΙVE		1-10		12/11			
Mailing Address 1719 VANCE AVENU	Е		1	10	2000	\$	300.00	
City CORAOPOLIS	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	15108	FRED TI	RELLO STA	TE HOUS	E REP 45TH	PA	
To Whom Paid			МО	DAY	YEAR			
CTE TO REELECT ROD WILT			1-10		i Zaux			
Mailing Address PO BOX 545			1	10	2000	\$	175.00	
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	17108	ROD W	LT STATE	HOUSE R	EP 17TH PA		
To Whom Paid			МО	DAY	YEAR			
OMMITTEE TO ELECT CHRIS ROSS								
Mailing Address PO BOX 11787			1	10	2000	\$	200.00	
City HARRISBURG State Zip Code (Plus 4				Description of Expenditure				
	PA	17108	CHRIS I	ROSS STAT	TE HOUSE	REP 158TH	PA	

To Whom Paid JAY COSTA FOR STATE SENATE Mailing Address 317 NEWPORT ROAD City PITTSBURGH State Zip Code (Plus 4) 1 10 2000 \$ City PITTSBURGH To Whom Paid COMMITTEE TO REELECT NICK COLAFELLA Mailing Address 111 SHADYSIDE DRIVE City ALIQUIPPA State Zip Code (Plus 4) 1 10 2000 \$ City ALIQUIPPA State Zip Code (Plus 4) 1 10 2000 \$ City ALIQUIPPA State Zip Code (Plus 4) 1 10 2000 \$ To Whom Paid FRIENDS OF JIM RHOADES COMMITTEE Mailing Address PO BOX 792 City HARRISBURG State Zip Code (Plus 4) 1 10 2000 \$ City HARRISBURG State Zip Code (Plus 4) 1 10 2000 \$ Description of Expenditure NICHOLAS COLAFELLA STATE HOUSE MO DAY YEAR Address PO BOX 792 City HARRISBURG State Zip Code (Plus 4) 1 10 2000 \$ City HARRISBURG MO DAY YEAR To Whom Paid PA ASSN OF REHAB FACILITIES	250.00 250.00 REP 15TH PA 250.00				
Mailing Address 317 NEWPORT ROAD 1 10 2000 \$ City PITTSBURGH State Zip Code (Plus 4) Description of Expenditure 15221 JAY COSTA STATE SENATE 43RD PA To Whom Paid MO DAY YEAR Mailing Address 111 SHADYSIDE DRIVE 1 10 2000 \$ City ALIQUIPPA State Zip Code (Plus 4) Description of Expenditure To Whom Paid MO DAY YEAR FRIENDS OF JIM RHOADES COMMITTEE MO DAY YEAR Mailing Address PO BOX 792 1 10 2000 \$ City HARRISBURG State Zip Code (Plus 4) Description of Expenditure MO DAY YEAR TO Whom Paid MO DAY YEAR	250.00 REP 15TH PA				
City PITTSBURGH State PA 15221 Description of Expenditure JAY COSTA STATE SENATE 43RD PA To Whom Paid COMMITTEE TO REELECT NICK COLAFELLA Mailing Address 111 SHADYSIDE DRIVE 1 10 2000 \$ City ALIQUIPPA State PA 15001 DAY YEAR To Whom Paid PA 15001 NICHOLAS COLAFELLA STATE HOUSE To Whom Paid PA 15001 NICHOLAS COLAFELLA STATE HOUSE MO DAY YEAR To Whom Paid PA 15001 DAY YEAR To Whom Paid PA 15001 DAY YEAR City HARRISBURG State Zip Code (Plus 4) Description of Expenditure PA 17108 JAMES RHOADES STATE SENATE 29Th To Whom Paid PA 17108 JAMES RHOADES STATE SENATE 29Th	250.00 REP 15TH PA				
PA	REP 15TH PA				
To Whom Paid COMMITTEE TO REELECT NICK COLAFELLA MO DAY YEAR	REP 15TH PA				
COMMITTEE TO REELECT NICK COLAFELLA Mailing Address 111 SHADYSIDE DRIVE 1 10 2000 \$ City ALIQUIPPA State Zip Code (Plus 4) Description of Expenditure NICHOLAS COLAFELLA STATE HOUSE To Whom Paid FRIENDS OF JIM RHOADES COMMITTEE Mailing Address PO BOX 792 City HARRISBURG State Zip Code (Plus 4) Description of Expenditure 1 10 2000 \$ City HARRISBURG State Zip Code (Plus 4) Description of Expenditure 1 10 2000 \$ To Whom Paid To Whom Paid To Whom Paid	REP 15TH PA				
City ALIQUIPPA State PA 15001 Description of Expenditure NICHOLAS COLAFELLA STATE HOUSE To Whom Paid FRIENDS OF JIM RHOADES COMMITTEE Mailing Address PO BOX 792 City HARRISBURG State PA 17108 Description of Expenditure NICHOLAS COLAFELLA STATE HOUSE MO DAY YEAR To Whom Paid To Whom Paid To Whom Paid To Whom Paid	REP 15TH PA				
TO Whom Paid FRIENDS OF JIM RHOADES COMMITTEE Mailing Address PO BOX 792 City HARRISBURG State PA 17108 To Whom Paid					
To Whom Paid FRIENDS OF JIM RHOADES COMMITTEE Mailing Address PO BOX 792 City HARRISBURG State PA 17108 To Whom Paid					
FRIENDS OF JIM RHOADES COMMITTEE Mo DAY YEAR Mo DAY YEAR 1 10 2000 \$ City HARRISBURG State PA 17108 To Whom Paid To Whom Paid MO DAY YEAR 1 10 2000 \$ MO DAY YEAR PA 17108 Description of Expenditure JAMES RHOADES STATE SENATE 29TH	250.00				
City HARRISBURG State PA To Whom Paid State PA Zip Code (Plus 4) JAMES RHOADES STATE SENATE 29TH MO DAY YEAR	250.00				
To Whom Paid PA 17108 JAMES RHOADES STATE SENATE 29TH MO DAY YEAR					
To Whom Paid MO DAY YEAR					
MO DAY YEAR	I PA				
Mailing Address 2400 PARK DRIVE 1 10 2000 \$	1,470.00				
City HARRISBURG State Zip Code (Plus 4) Description of Expenditure					
PA 17110 PAC TO PAC TRANSFER	PAC TO PAC TRANSFER				
To Whom Paid JAY COSTA FOR STATE SENTAE MO DAY YEAR					
Mailing Address 314 NEWPORT ROAD 1 18 2000 \$	250.00				
City PITTSBURGH State Zip Code (Plus 4) Description of Expenditure	Description of Expenditure				
PA 15221 JAY COSTA STATE SENATE 43RD PA	JAY COSTA STATE SENATE 43RD PA				
To Whom Paid FRIENDS FOR DENNIS LEH MO DAY YEAR					
Mailing Address PO BOX 545 1 21 2000 \$	200.00				
City HARRISBURG State Zip Code (Plus 4) Description of Expenditure					
City HARRISBURG State Zip Code (Plus 4) Description of Expenditure	1 PA				
PA 17108 DENNIS LEH STATE HOUSE REP 130TI					
PA 17108 DENNIS LEH STATE HOUSE REP 130TI To Whom Paid MO DAY YEAR					
PA 17108 DENNIS LEH STATE HOUSE REP 130TI To Whom Paid TILGHMAN FOR STATE SENATOR PA 17108 DENNIS LEH STATE HOUSE REP 130TI MO DAY YEAR	1,000.00				
TO Whom Paid TILGHMAN FOR STATE SENATOR Mailing Address BOX 792 FEDERAL SQUARE STATION PA 17108 DENNIS LEH STATE HOUSE REP 130TI MO DAY YEAR 1 21 2000 \$	1,000.00				
TO Whom Paid TILGHMAN FOR STATE SENATOR PA 17108 DENNIS LEH STATE HOUSE REP 130TI MO DAY YEAR	· ·				
TO Whom Paid TILGHMAN FOR STATE SENATOR Mailing Address BOX 792 FEDERAL SQUARE STATION City HARRISBURG State PA 17108 DENNIS LEH STATE HOUSE REP 130TH MO DAY YEAR 1 21 2000 \$ City HARRISBURG PA 171081731 To Whom Paid	· ·				
To Whom Paid TILGHMAN FOR STATE SENATOR Mailing Address BOX 792 FEDERAL SQUARE STATION City HARRISBURG State PA 17108 DENNIS LEH STATE HOUSE REP 130TH MO DAY YEAR 1 21 2000 \$ City HARRISBURG PA 171081731 Description of Expenditure RICHARD TILGHMAN STATE SENATE 1	· ·				
To Whom Paid TILGHMAN FOR STATE SENATOR Mailing Address BOX 792 FEDERAL SQUARE STATION City HARRISBURG State PA 17108 To Whom Paid	· ·				
To Whom Paid TILGHMAN FOR STATE SENATOR Mailing Address BOX 792 FEDERAL SQUARE STATION City HARRISBURG State PA TO Whom Paid REELECT WM W "BILL" RIEGER PA TO Whom Paid REELECT WM W "BILL" RIEGER DENNIS LEH STATE HOUSE REP 130TH MO DAY YEAR TO Whom Paid REELECT WM W "BILL" RIEGER	7TH PA				

To Whom Paid					DAY	YEAR			
FRIENDS OF CHUCK MCILHINNEY Mailing Address PO BOX 2014				1	21	2000	\$	70.00	
			Tin Code (Plan 4)						
City DOYLE	STOWN	State	Zip Code (Plus 4)	1	tion of Exp		ATE HOUSE	: DED 1/2DD	
PA 18901				CHARLES MCILHIINNEY STATE HOUSE REP 143RD PA					
To Whom Paid				мо	DAY	YEAR			
RAY BUNT FOR LEGISLATURE COMMITTEE									
Mailing Address 222 FULMER ROAD			1	21	2000	\$	250.00		
City SPRING	G MOUNT	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		PA	19478	RAYMO	ND BUNT S	STATE HO	USE REP 1	47TH PA	
To Whom Paid				МО	DAY	YEAR			
CITIZENS FOR	HUGHES								
Mailing Addres	ss PO BOX 13031			1	21	2000	\$	250.00	
City PHILAD	DELPHIA	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		PA	19101	VINCEN	T HUGHES	STATE S	SENATE 7TH	I PA	
To Whom Paid				мо	DAY	YEAR			
FRIENDS OF B	OB ALLEN			МО	DAI	ILAK			
Mailing Addres	ss PO BOX 545			1	21	2000	\$	250.00	
City HARRI	SBURG	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		PA	17108	BOB ALI	LEN STATE	HOUSE	RE 125TH F	PA	
To Whom Paid				МО	DAY	YEAR			
HRCC 2000				140		ILAK			
Mailing Addres	s PO BOX 11787			1	21	2000	\$	1,000.00	
City HARRI	SBURG	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		PA	17108	RECEPTION 2/14/2000					
To Whom Paid				мо	DAY	YEAR			
DAN FRANKEL	FOR THE 23RD DISTR	ICT CTE		1-10	J	1 Z/IIX			
Mailing Addres	ss PO BOX 81594			2	21	2000	\$	250.00	
City PITTSE	BURGH	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		PA	15217	DAN FR	ANKEL STA	ATE HOUS	SE REP 23 F	RD PA	
To Whom Paid				МО	DAY	VEAD			
To Whom Paid FRIENDS OF T				мо	DAY	YEAR			
FRIENDS OF T	IM MURPHY			MO 2	DAY 3	YEAR 2000	\$	300.00	
FRIENDS OF T	IM MURPHY	State	Zip Code (Plus 4)	2		2000	\$	300.00	
FRIENDS OF T	IM MURPHY SS PO BOX 792	State PA	Zip Code (Plus 4) 17108	2 Descript	3 tion of Exp	2000 enditure	\$ E 37TH PA	300.00	
FRIENDS OF T Mailing Addres City HARRIS	IM MURPHY PO BOX 792 SBURG			2 Descript TIM MU	3 tion of Exp	2000 enditure		300.00	
FRIENDS OF T Mailing Addres City HARRIS To Whom Paid	IM MURPHY PO BOX 792 SBURG			2 Descript	3 tion of Exp	2000 enditure		300.00	
FRIENDS OF T Mailing Addres City HARRIS To Whom Paid	SBURG RON BUXTON			2 Descript TIM MU	3 tion of Exp	2000 enditure			
FRIENDS OF T Mailing Addres City HARRIS To Whom Paid CITIZENS FOR Mailing Addres	SBURG RON BUXTON			Descript TIM MU MO	3 tion of Exp RPHY STAT	2000 enditure TE SENAT YEAR 2000	E 37TH PA	250.00	

To Whom Paid	МО	DAY	YEAR					
FRIENDS OF ITALO CAPPABIANCA	MO	DAI	ILAK					
Mailing Address 3924 ELIOT ROAD				9	2000	\$	200.00	
City ERIE	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	16508	ITALO CAPPABIANCA STATE HOUSE REP 2ND PA					
To Whom Paid				DAY	YEAR			
COMMITTEE FOR KARL BOYES					ILAK			
Mailing Address PO BOX 426				9	2000	\$	200.00	
City ERIE	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	16512	KARL BOYES STATE HOUSE RE 3RD PA					
							PAGE TOTAL	
Enter Grand Total of Expenditures	\$	8,365.00						