

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

Nate For Congress

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** ▼

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on  /  /  in the State of

(c) 30-Day **POST**-Election Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 Lisa Ellen Payne

Signature of Treasurer Lisa Ellen Payne *[Electronically Filed]* 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.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Nate For Congress**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	14431.00	14431.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	14431.00	14431.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	7930.52	7930.52
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	7930.52	7930.52
8. Cash on Hand at Close of Reporting Period (from Line 27).....	13439.55	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	460.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Nate For Congress**

Report Covering the Period: From:  /  /  To:  /  /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13581.00	13581.00
(ii) Unitemized .....	850.00	850.00
(iii) TOTAL of contributions from individuals .....	14431.00	14431.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	14431.00	14431.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	460.00	460.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	460.00	460.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	14891.00	14891.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	7930.52	7930.52
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	7930.52	7930.52

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	6479.07
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	14891.00
25. SUBTOTAL (add Line 23 and Line 24).....	21370.07
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7930.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	13439.55

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Nate For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Patrick Ahern**

Mailing Address 829 N 28TH ST

City Philadelphia State PA Zip Code 19130

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Student

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2012

**Transaction ID : SA11AI.4154**

Amount of Each Receipt this Period  
 500.00

In-kind -

**B.** Full Name (Last, First, Middle Initial)  
**Barbara Barron**

Mailing Address 6429 CORBIN AVE

City Woodland Hills State CA Zip Code 91367

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Writer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 07 / 2012

**Transaction ID : SA11AI.4132**

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
**Susan Chema**

Mailing Address 1409 33rd st Nw

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C**

Name of Employer Jacobs engineering Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2012

**Transaction ID : SA11AI.4104**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional).....

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

1050.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Nate For Congress**

**A. Ben Cohen**  
Full Name (Last, First, Middle Initial)  
Mailing Address box 16564822

City sioux falls	State SD	Zip Code 57186
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FEC ID number of contributing federal political committee. **C**

Name of Employer executive	Occupation ben and jerry's
-------------------------------	-------------------------------

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2012.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2012

**Transaction ID : SA11AI.4108**

Amount of Each Receipt this Period  
2012.00

**B. Gertrude Kleinman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 936 Hawn Cir

City Dayton	State OH	Zip Code 45419
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2012

**Transaction ID : SA11AI.4112**

Amount of Each Receipt this Period  
250.00

**C. Jonathan Kleinman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 936 hawn cir

City Dayton	State OH	Zip Code 45419
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2012

**Transaction ID : SA11AI.4127**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

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

3262.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nate For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jonathan Kleinman**

Mailing Address 936 hawn cir

City Dayton State OH Zip Code 45419

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1535.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 01 / 2012

**Transaction ID : SA11AI.4110**

Amount of Each Receipt this Period  
535.00

**B.** Full Name (Last, First, Middle Initial)  
**Jonathan Kleinman**

Mailing Address 936 hawn cir

City Dayton State OH Zip Code 45419

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2035.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 10 / 2012

**Transaction ID : SA11AI.4114**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jonathan Kleinman**

Mailing Address 936 hawn cir

City Dayton State OH Zip Code 45419

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2095.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2012

**Transaction ID : SA11AI.4196**

Amount of Each Receipt this Period  
60.00  
In-kind -

**SUBTOTAL** of Receipts This Page (optional).....

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

1095.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nate For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jonathan Kleinman**

Mailing Address 936 hawn cir

City Dayton State OH Zip Code 45419

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2476.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2012**

**Transaction ID : SA11AI.4115**

Amount of Each Receipt this Period  
**381.00**

**B.** Full Name (Last, First, Middle Initial)  
**David Krupp**

Mailing Address 737 S 8th Street

City Philadelphia State PA Zip Code 19147

FEC ID number of contributing federal political committee. **C**

Name of Employer CITYSPACE Occupation Real Estate Agent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 15 / 2012**

**Transaction ID : SA11AI.4128**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Lisa Ellen Payne**

Mailing Address 7867 Spring Ave

City Elkins Park State PA Zip Code 19027

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Stay at home Mother

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 15 / 2012**

**Transaction ID : SA11AI.4151**

Amount of Each Receipt this Period  
**200.00**  
 In-kind -

**SUBTOTAL** of Receipts This Page (optional).....

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

**831.00**



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nate For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lisa Ellen Payne**

Mailing Address 7867 Spring Ave

City Elkins Park State PA Zip Code 19027

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Stay at home Mother

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2012

**Transaction ID : SA11AI.4119**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Miguel Pineiros**

Mailing Address 711 Dresher Woods Dr

City Dresher State PA Zip Code 19025

FEC ID number of contributing federal political committee. **C**

Name of Employer Sitrof Technologies Occupation Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2012

**Transaction ID : SA11AI.4121**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**WIRTSHAFTER Robert**

Mailing Address 1428 CLOVERLY LANE

City Rydal State PA Zip Code 19046

FEC ID number of contributing federal political committee. **C**

Name of Employer WIRTSHAFTER ASSOCIATES, INC Occupation CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 01 / 2012

**Transaction ID : SA11AI.4143**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional).....

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

**525.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nate For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joshua Rolnick**

Mailing Address 1 GOJO Plaza Suite 350

City Akron State OH Zip Code 44311

FEC ID number of contributing federal political committee. **C**

Name of Employer Walnut Ridge Occupation Writer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 16 / 2012

**Transaction ID : SA11AI.4123**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Unitemized Unitemized**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2012

**Transaction ID : SA11AI.4138**

Amount of Each Receipt this Period  
 4038.00

**C.** Full Name (Last, First, Middle Initial)  
**Aaron Willsey**

Mailing Address 30 Center St

City Annandale State NJ Zip Code 08801

FEC ID number of contributing federal political committee. **C**

Name of Employer North Hunterdon-Voorhees Regio Occupation Teacher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 13 / 2012

**Transaction ID : SA11AI.4125**

Amount of Each Receipt this Period  
 280.00

**SUBTOTAL** of Receipts This Page (optional).....

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

6818.00

13581.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 18
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nate For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATHAN I KLEINMAN**

Mailing Address 464 LEEDOM ST

City State Zip Code  
JENKINTOWN PA 19046

FEC ID number of contributing federal political committee. **C** H2PA13128

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
460.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2012

**Transaction ID : SA13A.4156**

Amount of Each Receipt this Period  
460.00

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

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

460.00

460.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nate For Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. Actblue</b>		M M / D D / Y Y Y Y 03 / 11 / 2012	
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period	
City Cambridge State MA Zip Code 02138		80.27	
Purpose of Disbursement		Transaction ID : SB17.4190	
Candidate Name Nate For Congress		Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: PA District: 13			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. Actblue</b>		M M / D D / Y Y Y Y 03 / 18 / 2012	
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period	
City Cambridge State MA Zip Code 02138		4.75	
Purpose of Disbursement		Transaction ID : SB17.4189	
Candidate Name Nate For Congress		Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: PA District: 13			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. Actblue</b>		M M / D D / Y Y Y Y 03 / 25 / 2012	
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period	
City Cambridge State MA Zip Code 02138		12.46	
Purpose of Disbursement		Transaction ID : SB17.4188	
Candidate Name Nate For Congress		Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: PA District: 13			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	97.46
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nate For Congress**

Full Name (Last, First, Middle Initial) <b>A. Actblue</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period 39.57 <b>Transaction ID : SB17.4187</b>
City Cambridge	State MA Zip Code 02138	
Purpose of Disbursement	001 Category/Type	
Candidate Name <b>Nate For Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 13		

Full Name (Last, First, Middle Initial) <b>B. Actblue</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period 3.95 <b>Transaction ID : SB17.4186</b>
City Cambridge	State MA Zip Code 02138	
Purpose of Disbursement	001 Category/Type	
Candidate Name <b>Nate For Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 13		

Full Name (Last, First, Middle Initial) <b>c. Actblue</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2012
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period 7.91 <b>Transaction ID : SB17.4184</b>
City Cambridge	State MA Zip Code 02138	
Purpose of Disbursement	001 Category/Type	
Candidate Name <b>Nate For Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 13		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	51.43
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nate For Congress**

Full Name (Last, First, Middle Initial) <b>A. Patrick Ahern</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2012
Mailing Address 829 N 28TH ST		Amount of Each Disbursement this Period 500.00
City Philadelphia	State PA Zip Code 19130	
Purpose of Disbursement In-kind -	Candidate Name	Transaction ID : SB17.4155
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Exxon Mobil</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 5959 Las Colinas Boulevard		Amount of Each Disbursement this Period 56.70
City Irving	State TX Zip Code 75039	
Purpose of Disbursement	Candidate Name <b>Nate For Congress</b>	Transaction ID : SB17.4175
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 13	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>C. Exxon Mobil</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address 5959 Las Colinas Boulevard		Amount of Each Disbursement this Period 27.40
City Irving	State TX Zip Code 75039	
Purpose of Disbursement	Candidate Name <b>Nate For Congress</b>	Transaction ID : SB17.4173
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 13	Category/Type 002	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	584.10
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 20d	<input type="checkbox"/> 19c 21

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NAME OF COMMITTEE (In Full)  
**Nate For Congress**

Full Name (Last, First, Middle Initial) <b>A. Kennedy Printing</b>		Date of Disbursement MM / DD / YYYY 02 / 10 / 2012
Mailing Address 5534 Baltimore Avenue		Amount of Each Disbursement this Period 1562.44
City Philadelphia	State PA	
Zip Code 19143	Purpose of Disbursement	Transaction ID : SB17.4165
Candidate Name <b>Nate For Congress</b>	Category/Type 006	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2012	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: PA	District: 13	

Full Name (Last, First, Middle Initial) <b>B. Kennedy Printing</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2012
Mailing Address 5534 Baltimore Avenue		Amount of Each Disbursement this Period 221.40
City Philadelphia	State PA	
Zip Code 19143	Purpose of Disbursement CAMPAIGN MATERIALS	Transaction ID : SB17.4161
Candidate Name <b>Nate For Congress</b>	Category/Type 006	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2012	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: PA	District: 13	

Full Name (Last, First, Middle Initial) <b>c. Mark Patrick Morgioni</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2012
Mailing Address 464 Leedom St		Amount of Each Disbursement this Period 300.00
City Jenkintown	State PA	
Zip Code 19046	Purpose of Disbursement	Transaction ID : SB17.4164
Candidate Name <b>Nate For Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2012	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: PA	District: 13	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2083.84
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 18			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nate For Congress**

Full Name (Last, First, Middle Initial) <b>A. Mark Patrick Morgioni</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2012
Mailing Address 464 Leedom St		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : SB17.4163</b>
City Jenkintown	State PA	
Zip Code 19046	Purpose of Disbursement 001	Category/ Type
Candidate Name <b>Nate For Congress</b>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: PA District: 13		

Full Name (Last, First, Middle Initial) <b>B. Mark Patrick Morgioni</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2012
Mailing Address 464 Leedom St		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4160</b>
City Jenkintown	State PA	
Zip Code 19046	Purpose of Disbursement CONSULTING FEE 001	Category/ Type
Candidate Name <b>Nate For Congress</b>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: PA District: 13		

Full Name (Last, First, Middle Initial) <b>c. Mark Patrick Morgioni</b>		Date of Disbursement MM / DD / YYYY 03 / 08 / 2012
Mailing Address 464 Leedom St		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.4158</b>
City Jenkintown	State PA	
Zip Code 19046	Purpose of Disbursement CONSULTING FEE 001	Category/ Type
Candidate Name <b>Nate For Congress</b>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: PA District: 13		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4200.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 20d	<input type="checkbox"/> 19c 21

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NAME OF COMMITTEE (In Full)  
**Nate For Congress**

Full Name (Last, First, Middle Initial) <b>A. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2012
Mailing Address 1735 Market St Ste LL		Amount of Each Disbursement this Period 33.52
City Philadelphia	State PA Zip Code 19103	
Purpose of Disbursement	Category/Type 002	<b>Transaction ID : SB17.4168</b>
Candidate Name <b>Nate For Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 1735 Market St Ste LL		Amount of Each Disbursement this Period 51.56
City Philadelphia	State PA Zip Code 19103	
Purpose of Disbursement	Category/Type 002	<b>Transaction ID : SB17.4166</b>
Candidate Name <b>Nate For Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	85.08
<b>TOTAL</b> This Period (last page this line number only).....	7101.93

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4156

Nate For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

NATHAN I KLEINMAN

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
464 LEEDOM ST

City State ZIP Code  
JENKINTOWN PA 19046

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
460.00 0.00 460.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 460.00  
**TOTALS** This Period (last page in this line only)..... 460.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.