

# 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.

12FE4M5

RYAN COSTELLO FOR CONGRESS

ADDRESS (number and street)

PO BOX 245

Check if different than previously reported. (ACC)

UWCHLAND

PA

19480-0245

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00554899

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

PA

06

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
01 / 01 / 2019

through

M M / D D / Y Y Y Y  
03 / 31 / 2019

M M / D D / Y Y Y Y  
03 / 31 / 2019

M M / D D / Y Y Y Y  
03 / 31 / 2019

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

DEXTER, LINDA, R, ,

Type or Print Name of Treasurer

Signature of Treasurer DEXTER, LINDA, R, ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
04 / 15 / 2019

M M / D D / Y Y Y Y  
04 / 15 / 2019

M M / D D / Y Y Y Y  
04 / 15 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**RYAN COSTELLO FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	2500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	- 2500.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	7697.99	35156.46
(b) Total Offsets to Operating Expenditures (from Line 14).....	684.50	13634.50
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	7013.49	21521.96
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	662356.19	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**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 05/2016)

Write or Type Committee Name

**RYAN COSTELLO FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	0.00
(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))..	0.00	0.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	684.50	13634.50
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	456.08	1251.28
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	1140.58	14885.78

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 11

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	7697.99	35156.46
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	1000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2500.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	7697.99	37656.46

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	668913.60
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1140.58
25. SUBTOTAL (add Line 23 and Line 24).....	670054.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7697.99
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	662356.19

# 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 11	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" 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)  
**RYAN COSTELLO FOR CONGRESS**

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

Mailing Address DEPT 0561

City CAROL STREAM	State IL	Zip Code 60132-0001
----------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
684.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 22 / 2019

**Transaction ID : AA2299E075204483CB10**

Amount of Each Receipt this Period  
684.50

Memo Item  
REFUND - AUTO INSURANCE

**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

Memo Item

**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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	684.50
<b>TOTAL</b> This Period (last page this line number only).....▶	684.50

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

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

FOR LINE NUMBER: PAGE 6 OF 11  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
**RYAN COSTELLO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FIRST RESOURCE BANK**

Mailing Address P O BOX 652

City: EXTON State: PA Zip Code: 19341-0652

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 362.92

Date of Receipt: 01 / 11 / 2019

Transaction ID : A6839E4AD45944E9CA92

Amount of Each Receipt this Period: 51.15

Memo Item  
INTEREST INCOME

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

Mailing Address 16 W MARKET STREET

City: WEST CHESTER State: PA Zip Code: 19382-3001

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 517.26

Date of Receipt: 01 / 31 / 2019

Transaction ID : AF114EBB6F6934B6FB73

Amount of Each Receipt this Period: 133.15

Memo Item  
INTEREST INCOME

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

Mailing Address 2 NORTH CHURCH STREET

City: WEST CHESTER State: PA Zip Code: 19380

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 221.40

Date of Receipt: 02 / 28 / 2019

Transaction ID : AEF63226AC3F461DB28

Amount of Each Receipt this Period: 97.40

Memo Item  
INTEREST INCOME

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 281.70

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

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

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

FOR LINE NUMBER: PAGE 7 OF 11  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
**RYAN COSTELLO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MERIDIAN BANK**

Mailing Address 16 W MARKET STREET

City WEST CHESTER State PA Zip Code 19382-3001

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 519.43

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2019

Transaction ID : **A692BAD49A14B4AF4A84**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2.17

Memo Item  
**INTEREST INCOME**

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

Mailing Address 2 NORTH CHURCH STREET

City WEST CHESTER State PA Zip Code 19380

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 322.36

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2019

Transaction ID : **AB8866BBF114245D7A35**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.96

Memo Item  
**INTEREST INCOME**

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

Mailing Address 16 W MARKET STREET

City WEST CHESTER State PA Zip Code 19382-3001

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 521.83

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2019

Transaction ID : **A863E0060B9634187ACC**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2.40

Memo Item  
**INTEREST INCOME**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	_____ 105.53
<b>TOTAL</b> This Period (last page this line number only).....▶	_____ 387.23

**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 8 OF 11	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. 50 WEST MARKET ASSOCIATES LP</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019	
Mailing Address 120 PENNSYLVANIA AVE			FEC Identification Number C	
City MALVERN	State PA	Zip Code 19355	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement STORAGE		Category/ Type 001	Transaction ID : B4EAA85E41E3F450BA97	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. DEXTER CAMPAIGNS</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019	
Mailing Address PO BOX 72			FEC Identification Number C	
City UWCHLAND	State PA	Zip Code 19480-0072	Amount of Each Disbursement this Period 1120.00	
Purpose of Disbursement CONSULTANT/FEC COMPLIANCE		Category/ Type 001	Transaction ID : B7019D418798646ED933	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ARISTOTLE INTERNATIONAL LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2019	
Mailing Address 205 EPNNYLVANIA AVE SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1035.00	
Purpose of Disbursement SOFTWARE SUPPORT		Category/ Type 001	Transaction ID : BCF98B2371CC642F5887	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2405.00
<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 9 OF 11			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2019		
Mailing Address 300 1ST STREET SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 325.41		
Purpose of Disbursement MEALS		Category/ Type 001	Transaction ID : B744AF10473134B9EBCD		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. USPS</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2019		
Mailing Address 475 L'ENFANT PLAZA SW			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20260	Amount of Each Disbursement this Period 52.47		
Purpose of Disbursement POSTAGE		Category/ Type 001	Transaction ID : B1566A56A3D7640AC8D0		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. CH BONNETT AND CO, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2019		
Mailing Address 191 PRESIDENTIAL BLVD SUITE 7 WEST			FEC Identification Number C		
City BALA CYNWYD	State PA	Zip Code 19004-1260	Amount of Each Disbursement this Period 660.00		
Purpose of Disbursement COMMERCIAL INSURANCE		Category/ Type 001	Transaction ID : B4C60D8B14C4E4499B1		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1037.88
<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 10 OF 11			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement
Mailing Address 475 L'ENFANT PLAZA SW		M M / D D / Y Y Y Y 01 / 29 / 2019
City WASHINGTON	State DC	Zip Code 20260
Purpose of Disbursement POSTAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 19.05
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B32013ACCE1CF442DADB <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. 50 WEST MARKET ASSOCIATES LP</b>		Date of Disbursement
Mailing Address 120 PENNSYLVANIA AVE		M M / D D / Y Y Y Y 02 / 03 / 2019
City MALVERN	State PA	Zip Code 19355
Purpose of Disbursement STORAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BD1A802F9DC55409A9BC <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. DEXTER CAMPAIGNS</b>		Date of Disbursement
Mailing Address PO BOX 72		M M / D D / Y Y Y Y 02 / 03 / 2019
City UWCHLAND	State PA	Zip Code 19480-0072
Purpose of Disbursement CONSULTANT/FEC COMPLIANCE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1340.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BAB23FC70A1714902AD8 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1609.05
<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 11 OF 11	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. INTERNAL REVENUE SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2019
Mailing Address 111 CONSTITUTION AVENUE, NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20024
Purpose of Disbursement 1120-POL TAX	001	
Candidate Name		Amount of Each Disbursement this Period 1290.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. 50 WEST MARKET ASSOCIATES LP</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2019
Mailing Address 120 PENNSYLVANIA AVE		FEC Identification Number C
City MALVERN	State PA	Zip Code 19355
Purpose of Disbursement STORAGE	001	
Candidate Name		Amount of Each Disbursement this Period 250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. BERKE FARAH LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2019
Mailing Address 1200 NEW HAMPSHIRE AVE NW SUITE 800		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20036-6805
Purpose of Disbursement LEGAL	001	
Candidate Name		Amount of Each Disbursement this Period 910.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7501.93