

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
TISEI CONGRESSIONAL COMMITTEE

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))....	281992.12	595590.85
(b) Total Contribution Refunds (from Line 20(d))	715.56	15625.56
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	281276.56	579965.29
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	125378.05	227125.95
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	20196.44
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	125378.05	206929.51
8. Cash on Hand at Close of Reporting Period (from Line 27).....	569256.04	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	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 12/2003)

Write or Type Committee Name

TISEI CONGRESSIONAL COMMITTEE

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).....	205825.12	485933.85
(ii) Unitemized.....	43167.00	44057.00
(iii) TOTAL of contributions from individuals ▶	248992.12	529990.85
(b) Political Party Committees.....	0.00	5000.00
(c) Other Political Committees (such as PACs).....	33000.00	60600.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	281992.12	595590.85
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	19351.55	155112.21
13. LOANS:		
(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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	20196.44
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	301343.67	770899.50

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	125378.05	227125.95
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	715.56	14875.56
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	750.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	715.56	15625.56
21. OTHER DISBURSEMENTS	0.00	6000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	126093.61	248751.51

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	394005.98
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	301343.67
25. SUBTOTAL (add Line 23 and Line 24).....	695349.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	126093.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	569256.04

**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 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER AGGANIS

Mailing Address P.O. BOX 8

City State Zip Code
READING MA 01867

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.4941

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
MARK AIELLO

Mailing Address 805 SUMMER ST

City State Zip Code
MANCHESTER MA 01944

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

Name of Employer Occupation
THE REVOLUTION GROUP EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.4943

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
PETER ALOISI

Mailing Address 1 WILLOWDALE DRIVE

City State Zip Code
LYNNFIELD MA 01940

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

Name of Employer Occupation
ALOISI AND ALOISI ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.4945

Amount of Each Receipt this Period
 250.00

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

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

2250.00

**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 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ROBERT AMATO

Mailing Address 21 PARISH RD

City State Zip Code
GEORGETOWN MA 01833

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

Name of Employer Occupation
MIDDLESEX SHERIFF'S OFFICE CORRECTIONS OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 21 / 2014

Transaction ID : SA11AI.4947

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ELIZABETH ARNOLD

Mailing Address 48 STRAND WAY - P.O. BOX 368

City State Zip Code
WEST HARWICH MA 02671

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.4967

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MARK ATTIA

Mailing Address 139 VALLEY STREET

City State Zip Code
BEVERLY MA 01915

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

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.4970

Amount of Each Receipt this Period
1000.00

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

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

2250.00

**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 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) NANCY AUDESSE		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address 97 LARCH ROW		Transaction ID : SA11AI.4974
City WENHAM	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) JOHN AVALLON		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 7 OBER STREET		Transaction ID : SA11AI.4980
City BEVERLY	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer CAPGEMINI	Occupation CONSULTANT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) ZUMA BANKS		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address PO BOX 611111		Transaction ID : SA11AI.4986
City ROSEMARY BEACH	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	3850.00
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: (check only one)	PAGE 8 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
OWEN BECKER

Mailing Address 26 MAIN ST

City LYNNFIELD State MA Zip Code 01940

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

Name of Employer TISEI CONGRESSIONAL COMMITTEE Occupation FIELD STAFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 17 / 2014

Transaction ID : SA11AI.4925

Amount of Each Receipt this Period
 34.86

IN-KIND: OFFICE SUPPLIES

B. Full Name (Last, First, Middle Initial)
OWEN BECKER

Mailing Address 26 MAIN ST

City LYNNFIELD State MA Zip Code 01940

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

Name of Employer TISEI CONGRESSIONAL COMMITTEE Occupation FIELD STAFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 04 / 2014

Transaction ID : SA11AI.4926

Amount of Each Receipt this Period
 84.98

IN-KIND: OFFICE SUPPLIES

C. Full Name (Last, First, Middle Initial)
OWEN BECKER

Mailing Address 26 MAIN ST

City LYNNFIELD State MA Zip Code 01940

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

Name of Employer TISEI CONGRESSIONAL COMMITTEE Occupation FIELD STAFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 28 / 2014

Transaction ID : SA11AI.4927

Amount of Each Receipt this Period
 17.96

IN-KIND: OFFICE SUPPLIES

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

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

137.80

**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 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
OWEN BECKER

Mailing Address 26 MAIN ST

City LYNNFIELD State MA Zip Code 01940

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

Name of Employer TISEI CONGRESSIONAL COMMITTEE Occupation FIELD STAFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2014

Transaction ID : SA11AI.4928

Amount of Each Receipt this Period
 24.81

IN-KIND: OFFICE SUPPLIES

B. Full Name (Last, First, Middle Initial)
OWEN BECKER

Mailing Address 26 MAIN ST

City LYNNFIELD State MA Zip Code 01940

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

Name of Employer TISEI CONGRESSIONAL COMMITTEE Occupation FIELD STAFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2014

Transaction ID : SA11AI.4929

Amount of Each Receipt this Period
 97.64

IN-KIND: OFFICE SUPPLIES

C. Full Name (Last, First, Middle Initial)
JIM BEDINGFIELD

Mailing Address 94 PROSPECT ST

City READING State MA Zip Code 01867

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

Name of Employer RAYTHEON Occupation DEFENSE CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5015

Amount of Each Receipt this Period
 500.00

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

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

622.45

**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 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) MS. JANET L BENNETT		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 12 PAGE ST APT 1		Transaction ID : SA11AI.5026
City DANVERS	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer DC MP WILKS BARRE PA	Occupation RN	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) CHRISTIAN A BERLE		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 6 SNOWS CT NW		Transaction ID : SA11AI.5029
City WASHINGTON	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer FREEDOM TO WORK	Occupation PRINCIPAL	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 625.00	

Full Name (Last, First, Middle Initial) ROGER BERLE		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 6 ISLAND AVE		Transaction ID : SA11AI.5031
City CLIFF ISLAND	State ME	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF-EMPLOYED	Occupation WRITER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
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: (check only one)	PAGE 11 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) MR. ROBERT BERMAN		Date of Receipt MM / DD / YYYY 02 / 10 / 2014
Mailing Address 40 CHESTNUT ST		Transaction ID : SA11AI.5033
City LYNNFIELD	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer AVON SUPPLY CO.	Occupation EXECUTIVE	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) MR. CHRISTOPHER BIBBY		Date of Receipt MM / DD / YYYY 03 / 28 / 2014
Mailing Address PO BOX 110		Transaction ID : SA11AI.5035
City LYNN	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer BIBBY REAL ESTATE CORP	Occupation REAL ESTATE	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) ANN R BLACKHAM		Date of Receipt MM / DD / YYYY 01 / 29 / 2014
Mailing Address 7 WAINWRIGHT ROAD UNIT 21		Transaction ID : SA11AI.5041
City WINCHESTER	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer COLDWELL BANKER (RETIRED)	Occupation REAL ESTATE (RETIRED)	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	2750.00
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: (check only one)		PAGE 12 OF 154		
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ERIC BOEMER

Mailing Address **276 WOBURN ST**

City **READING** State **MA** Zip Code **01867**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
03 / 20 / 2014

Transaction ID : SA11AI.5043

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
HELEN M BOLINO

Mailing Address **1093 MAIN STREET**

City **LYNNFIELD** State **MA** Zip Code **01940**

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

Name of Employer Occupation
NORTHRUP ASSOCIATES, INC. REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.5050

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
HELEN M BOLINO

Mailing Address **1093 MAIN STREET**

City **LYNNFIELD** State **MA** Zip Code **01940**

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

Name of Employer Occupation
NORTHRUP ASSOCIATES, INC. REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5051

Amount of Each Receipt this Period
 600.00

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

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

2600.00

**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 13 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOSEPH BOLINO

Mailing Address **6 JENNIFER RD**

City **WAKEFIELD** State **MA** Zip Code **01880**

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

Name of Employer **MULTIFUNDS** Occupation **SOFTWARE CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5053

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOSEPH BOLINO

Mailing Address **1093 MAIN STREET**

City **LYNNFIELD** State **MA** Zip Code **01940**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2400.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5055

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
ROBERT BRAGDON

Mailing Address **4 HIGH ST.**

City **MARBLEHEAD** State **MA** Zip Code **01945**

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

Name of Employer **CXO MEDIA** Occupation **PUBLISHER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.5072

Amount of Each Receipt this Period
250.00

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

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

2900.00

**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 14 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GERARD BRANDI

Mailing Address **3 SPARHAWK DR.**

City **LYNNFIELD** State **MA** Zip Code **01940**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 03 / 2014

Transaction ID : SA11AI.5074

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DR. ARTHUR BUCKLEY

Mailing Address **5 CEDAR GROVE AVE**

City **PEABODY** State **MA** Zip Code **01960**

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

Name of Employer **SELF** Occupation **DENTIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.5093

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MRS. GERALDINE BUNKER

Mailing Address **42 COUNTRY CLUB WAY**

City **IPSWICH** State **MA** Zip Code **01938**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 21 / 2014

Transaction ID : SA11AI.5101

Amount of Each Receipt this Period
250.00

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

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

700.00

**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 15 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JAMES CALLAHAN

Mailing Address 29 HERITAGE LANE

City LYNNFIELD State MA Zip Code 01940

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5121

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
A. BRADFORD CARD

Mailing Address 896 HELGA PLACE

City MCLEAN State VA Zip Code 22102

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

Name of Employer Occupation
DUTKO GROUP PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5133

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
DR. VITO CARDONE

Mailing Address 306 SUMMER STREET

City LYNNFIELD State MA Zip Code 01940

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

Name of Employer Occupation
CARDONE PEPROMED.COM PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.5137

Amount of Each Receipt this Period
 250.00

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

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

1000.00

**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 16 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) JOHN CARNEY		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 22 / 2014
Mailing Address 3 COOLIDGE PARK		Transaction ID : SA11AI.5139
City WAKEFIELD	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer FIRST TRANSIT	Occupation GENERAL MANAGER TRANSIT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) SCOTT CARPENTER		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2014
Mailing Address 71 FOREST HILL AVE		Transaction ID : SA11AI.5143
City LYNNFIELD	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer HIGHPOINT CAPITAL	Occupation LENDER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) THOMAS CARPI		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2014
Mailing Address 4 BRYANT ST.		Transaction ID : SA11AI.5145
City LYNNFIELD	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF-EMPLOYED	Occupation ENTREPRENEUR	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
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: (check only one)	PAGE 17 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GORDON CARR

Mailing Address 23 HIGH STREET

City HINGHAM State MA Zip Code 02043

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

Name of Employer GMC STRATEGIES Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5147

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
JAMES CARTER

Mailing Address 7 FERNWAY

City LYNNFIELD State MA Zip Code 01940

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 11 / 2014

Transaction ID : SA11AI.5149

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
MICHAEL CIMINI

Mailing Address 8 SIDNEY RD.

City STURBRIDGE State MA Zip Code 01566

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

Name of Employer AUSTIN LIQUORS, INC. Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 04 / 2014

Transaction ID : SA11AI.5184

Amount of Each Receipt this Period
 500.00

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

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

1500.00

**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 18 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) LISA CIULLA		Date of Receipt MM / DD / YYYY 02 / 07 / 2014
Mailing Address PO BOX 460		Transaction ID : SA11AI.5186
City MIDDLETON	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer M. CIULLA, INC.	Occupation OFFICE MANAGER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) MICHAEL CIULLA		Date of Receipt MM / DD / YYYY 02 / 07 / 2014
Mailing Address PO BOX 460		Transaction ID : SA11AI.5188
City MIDDLETON	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer M. CIULLA, INC.	Occupation PROJECT MANAGER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) PETER CLAY		Date of Receipt MM / DD / YYYY 03 / 31 / 2014
Mailing Address 14 ARBOR STREET		Transaction ID : SA11AI.5196
City WENHAM	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer GRINDSTONE ADVISORY	Occupation CONSULTANT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	600.00
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: (check only one)	PAGE 19 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. SUSAN COLE

Mailing Address 4501 DEERFIELD CIRCLE

City Peabody State MA Zip Code 01960

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

Name of Employer NORTHRUP ASSOCIATEES Occupation REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.5206

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JERRY CONGDON

Mailing Address 33 PAGE ROAD

City Bedford State MA Zip Code 01730

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

Name of Employer CONGDON LAW OFFICES Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : SA11AI.5211

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
KENNETH CONNOLLY

Mailing Address 357 CANDLESTICK RD

City North Andover State MA Zip Code 01845

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

Name of Employer COMMONWEALTH WASTE TRANSPORTATIC Occupation MANAGING PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.5217

Amount of Each Receipt this Period
500.00

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

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

1250.00

**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 20 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) JOHN COOK		Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 46 HALL AVE		Transaction ID : SA11AI.5225
City WATERTOWN	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation CONSULTANT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) MS. MARJORIE COOKE		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 50 WHITE OAK RD		Transaction ID : SA11AI.5227
City WELLESLEY	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer COOKE, CLANCY, GRUENTHAL LLP	Occupation ATTORNEY	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) BRIAN COUGHLIN		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 13 WALTON LANE		Transaction ID : SA11AI.5233
City WAKEFIELD	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	2250.00
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: (check only one)	PAGE 21 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER COVINGTON

Mailing Address 126 COLES ISLAND ROAD

City State Zip Code
GLOUCESTER MA 01930

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

Name of Employer Occupation
COVINGTON ASSOCIATES BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.5240

Amount of Each Receipt this Period
1600.00

B. Full Name (Last, First, Middle Initial)
BRADLEY CRATE

Mailing Address 138 CONANT ST
1ST FLOOR

City State Zip Code
BEVERLY MA 01915

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

Name of Employer Occupation
RED CURVE SOLLUTIONS PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11AI.5252

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BRADLEY CRATE

Mailing Address 138 CONANT ST
1ST FLOOR

City State Zip Code
BEVERLY MA 01915

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

Name of Employer Occupation
RED CURVE SOLLUTIONS PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 29 / 2014

Transaction ID : SA11AI.5253

Amount of Each Receipt this Period
500.00

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

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

2600.00

**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 22 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BRADLEY CRATE

Mailing Address 138 CONANT ST
1ST FLOOR

City BEVERLY State MA Zip Code 01915

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

Name of Employer RED CURVE SOLLUTIONS Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1700.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 13 / 2014

Transaction ID : SA11AI.5254

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER CRAWFORD

Mailing Address 849 PIEDMONT AVE NE #5

City ATLANTA State GA Zip Code 30308

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

Name of Employer FRIENDS OF JACK KINGSTON Occupation CAMPAIGN MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 24 / 2014

Transaction ID : SA11AI.5258

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
BRIAN CRESTA

Mailing Address 5 OGDEN LANE

City MIDDLETON State MA Zip Code 01949

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

Name of Employer SERCO, INC. Occupation VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5262

Amount of Each Receipt this Period
1000.00

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

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

1350.00

**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 23 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ARDESHIR DADGAR

Mailing Address 23 SUMNER RD. APT 3

City State Zip Code
BROOKLINE MA 02445

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

Name of Employer Occupation
DADGAR FINANCIAL INSURANCE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.5290

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ANOWSHIRVAN DADGER

Mailing Address 30 BATTLE GREEN ROAD

City State Zip Code
LEXINGTON MA 02421

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

Name of Employer Occupation
DADGER INSURANCE AGENCY INC INSURANCE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5292

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
WILLIAM DARLING

Mailing Address 24 PEQUOT ROAD

City State Zip Code
MARBLEHEAD MA 01945

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

Name of Employer Occupation
SELF ACCOUNTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.5300

Amount of Each Receipt this Period
500.00

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

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

3250.00

**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 24 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. ANTHONY DECOTIS

Mailing Address 79 BOW RIDGE ROAD

City LYNN State MA Zip Code 01904

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

Name of Employer TOWN LINE TEN PIN Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.5310

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
M. JOSEPH DEMATTEO

Mailing Address 80 WASHINGTON STREET

City NORWELL State MA Zip Code 02061

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

Name of Employer SELF - EMPLOYED Occupation REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.5322

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
SAMUEL DENBO

Mailing Address 18 ASPEN ROAD

City SWAMPSCOTT State MA Zip Code 01907

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

Name of Employer SELF-EMPLOYED Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5333

Amount of Each Receipt this Period
 500.00

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

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

1500.00

**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 25 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BRACKETT DENNISTON III

Mailing Address 1081 HILLSIDE RD

City State Zip Code
FAIRFIELD CT 06824

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

Name of Employer Occupation
GENERAL ELECTRIC CO LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2014

Transaction ID : SA11AI.5335

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DIANE DESANTIS

Mailing Address 140 WINONA ST

City State Zip Code
WEST PEABODY MA 01960

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

Name of Employer Occupation
N E ACCOUNTS RECEIVABLE MANAGEMENT BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.5350

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
VINCENT DEVITO

Mailing Address 320 E 46TH ST
APT 7G

City State Zip Code
NEW YORK NY 10017-3043

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

Name of Employer Occupation
BOWDITCH & DEWEY LLP ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 19 / 2014

Transaction ID : SA11AI.5356

Amount of Each Receipt this Period
325.00

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

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

1825.00

**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 26 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARK DICKINSON

Mailing Address **8 BASSIN LN**

City **SCITUATE** State **MA** Zip Code **02066**

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

Name of Employer **DICKINSON DEVELOPMENT CORP** Occupation **DEVELOPER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.5362

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MICHAEL DIMARCO

Mailing Address **47 MAMMOTH RD**

City **WINDHAM** State **NH** Zip Code **03087**

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

Name of Employer **SELF - EMPLOYED** Occupation **EQUIPMENT REPAIR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.5368

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ANTHONY DINOVI

Mailing Address **3 RAVINE ROAD**

City **WELLESLEY** State **MA** Zip Code **02481**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.5370

Amount of Each Receipt this Period
2600.00

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

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

3100.00

**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 27 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. GLENN DOLBEARE		Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 1 THOMAS ROAD		Transaction ID : SA11AI.5378
City LYNNFIELD	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer WAKEFIELD ITEM COMPANY	Occupation PRINTER/PUBLISHER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) B. WALTER DOWNEY		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 135 BELLEVUE ST.		Transaction ID : SA11AI.5389
City WEST ROXBURY	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation PRIVATE INVESTOR	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. MR. TIMOTHY DOYLE		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 19 WESTOVER DRIVE		Transaction ID : SA11AI.5391
City LYNNFIELD	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer COLONNA & DOYLE	Occupation ATTORNEY	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1050.00
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: (check only one)	PAGE 28 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WILLIAM DOYLE

Mailing Address 7 WINCHESTER DR

City State Zip Code
LYNNFIELD MA 01940

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

Name of Employer Occupation
LEAVIS & REST ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.5393

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MARGARET DWYER

Mailing Address 23 ASPEN HOLLOW

City State Zip Code
EASTON MA 02356

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.5406

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS. BARBARA EBERT

Mailing Address 1 CHRISTINA

City State Zip Code
WAYLAND MA 01778

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : SA11AI.5412

Amount of Each Receipt this Period
250.00

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

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

1250.00

**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 29 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOANNE ESPOSITO

Mailing Address 123 LOCKSLEY ROAD

City LYNNFIELD State MA Zip Code 01940

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

Name of Employer VERIZON WIRELESS Occupation SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5426

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID FANG

Mailing Address 156 LAFAYETTE ST

City SALEM State MA Zip Code 01970

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

Name of Employer SELF Occupation DENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.5435

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
CHRISTINA FERRI

Mailing Address 90 HARBOR AVE

City MARBLEHEAD State MA Zip Code 01945

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2014

Transaction ID : SA11AI.5457

Amount of Each Receipt this Period
 500.00

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

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

1000.00

**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 30 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GRACE K FEY

Mailing Address 66 COMMONWEALTH AVE.

City State Zip Code
BOSTON MA 02116

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

Name of Employer Occupation
GRACE FEY ADVISORS, LLC CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.5460

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
GRACE K FEY

Mailing Address 66 COMMONWEALTH AVE.

City State Zip Code
BOSTON MA 02116

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

Name of Employer Occupation
GRACE FEY ADVISORS, LLC CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.5461

Amount of Each Receipt this Period
-1000.00
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
GRACE K FEY

Mailing Address 66 COMMONWEALTH AVE.

City State Zip Code
BOSTON MA 02116

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

Name of Employer Occupation
GRACE FEY ADVISORS, LLC CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.5462

Amount of Each Receipt this Period
1000.00
REDESIGNATION TO GENERAL

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

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

1000.00

**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 31 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DEBRA FILOCOMA

Mailing Address 4 TOBEY LANE

City ANDOVER State MA Zip Code 01810

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

Name of Employer PORTSMOUTH PEDIATRIC DENTISTRY Occupation PEDIATRIC DENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 03 / 2014

Transaction ID : SA11AI.5468

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
PATRICIA FITZGERALD

Mailing Address 66 CONRAD RD

City MELROSE State MA Zip Code 02176

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

Name of Employer BRAD HUTCHINSON REAL ESTATE Occupation REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 03 / 2014

Transaction ID : SA11AI.5472

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ALBION FLETCHER

Mailing Address 135 WEST ST

City BRAINTREE State MA Zip Code 02184

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

Name of Employer GE Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 29 / 2014

Transaction ID : SA11AI.5481

Amount of Each Receipt this Period
250.00

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

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

1000.00

**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 32 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOSEPH FODERA

Mailing Address 17 REARDON RD.

City MEDFORD State MA Zip Code 02155

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.5485

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
MARK FORZIATI

Mailing Address 90 HARBOR AVE

City MARBLEHEAD State MA Zip Code 01945

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2014

Transaction ID : SA11AI.5495

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
JAY FRANKE

Mailing Address 65 E GOETHE 3W

City CHICAGO State IL Zip Code 60610

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

Name of Employer Occupation
 SELF ARTIST/PRODUCER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 19 / 2014

Transaction ID : SA11AI.5499

Amount of Each Receipt this Period
 2600.00

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

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

4100.00

**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 33 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. JAY FRANKE		Date of Receipt M M / D D / Y Y Y Y 02 / 19 / 2014	
Mailing Address 65 E GOETHE 3W		Transaction ID : SA11AI.5500	
City CHICAGO	State IL	Zip Code 60610	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer SELF	Occupation ARTIST/PRODUCER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) B. LISA GALLAGHER		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2014	
Mailing Address 4 PERKINS WAY		Transaction ID : SA11AI.5524	
City NEWBURYPORT	State MA	Zip Code 01950	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer HAWTAN LEATHERS, LLC	Occupation LEATHER MANUFACTURER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. THEODORE GEORGE		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 277A HUNTINGTON AVE		Transaction ID : SA11AI.5541	
City BOSTON	State MA	Zip Code 02115	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer OFF CAMPUS APARTMENT FINDER	Occupation VICE PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	3600.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 34 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ANNE GERAGHTY

Mailing Address 45 SIERRA ROAD

City State Zip Code
HYDE PARK MA 02136

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

Name of Employer Occupation
GERAGHTY ASSOCIATES, INC. PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5547

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
KENNETH GLOWACKI

Mailing Address 15 HICKORY LANE

City State Zip Code
UPTON MA 01568

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

Name of Employer Occupation
TOWN OF UPTON TREASURER/COLLECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 24 / 2014

Transaction ID : SA11AI.5564

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JANE GNAZZO

Mailing Address 169 COMMONWEALTH AVE.
#1

City State Zip Code
BOSTON MA 02116

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

Name of Employer Occupation
CORIANDER INC. REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5567

Amount of Each Receipt this Period
1000.00

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

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

1750.00

**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 35 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JERRY GNAZZO

Mailing Address 3700 ISLAND MORRINGS PKWY
#15

City State Zip Code
PORT ARANSAS TX 78373

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

Name of Employer Occupation
CORIANDER DEV LLC REAL ESTATE DEVELOPMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5569

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
GABRIEL GOMEZ

Mailing Address 59 HIGHLAND AVE

City State Zip Code
COHASSET MA 02025

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

Name of Employer Occupation
SELF BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2014

Transaction ID : SA11AI.5573

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
RYAN GOUGH

Mailing Address 26 MAIN ST

City State Zip Code
LYNNFIELD MA 01940

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

Name of Employer Occupation
TISEI CONGRESSIONAL COMMITTEE CAMPAING MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SA11AI.4931

Amount of Each Receipt this Period
359.70
IN-KIND: OFFICE SUPPLIES

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

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

2359.70

**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 36 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. DANIEL GRABAUSKAS

Mailing Address 425 SOUTH ST
APT 3204

City HONOLULU State HI Zip Code 96813

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

Name of Employer HONOLULU AUTHORITY FOR RAPID TRANSI Occupation EXECUTIVE DIRECTOR AND CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : SA11AI.5595

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
RUSSELL GRAHAM

Mailing Address 68 MAPLE RIDGE ROAD

City READING State MA Zip Code 01867

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.5599

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. RICHARD GREGORIO

Mailing Address 17 CRYSTAL DRIVE

City STONEHAM State MA Zip Code 02180

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

Name of Employer COBHAM Occupation CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 30 / 2014

Transaction ID : SA11AI.5620

Amount of Each Receipt this Period
250.00

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 37 OF 154
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PAUL GUANCI

Mailing Address 54 CROSS LANE

City State Zip Code
BEVERLY MA 01915

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

Name of Employer Occupation
SUPER SUB AND CASUAL CATERING OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.5630

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ROBERT GUPTILL

Mailing Address 9 FAIRVIEW CIRCLE

City State Zip Code
GROVELAND MA 01834

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

Name of Employer Occupation
DYNAMICS RESEARCH CORPORATION PROGRAM MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5639

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
JEFFREY GUTHERY

Mailing Address 224 MILL POND ROAD

City State Zip Code
NOTTINGHAM NH 03290

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : SA11AI.5641

Amount of Each Receipt this Period
2600.00

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

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

2900.00

**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 38 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BRAD HAMLIN

Mailing Address 17 SPRINGVALE ROAD

City READING State MA Zip Code 01867

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

Name of Employer TRIPLE POINT TECHNOLOGY, INC. Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5650

Amount of Each Receipt this Period
 1000.00

1100.00

B. Full Name (Last, First, Middle Initial)
MICHELE HANSS

Mailing Address 207 SUFFOLK RD

City CHESTNUT HILL State MA Zip Code 02467

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

Name of Employer SELF-EMPLOYED Occupation ENTREPRENUER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5654

Amount of Each Receipt this Period
 250.00

250.00

C. Full Name (Last, First, Middle Initial)
PETER HART

Mailing Address 101 BUBIER ROAD

City MARBLEHEAD State MA Zip Code 01945

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : SA11AI.5671

Amount of Each Receipt this Period
 500.00

500.00

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

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

1750.00

**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 39 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PETER HART

Mailing Address 101 BUBIER ROAD

City State Zip Code
MARBLEHEAD MA 01945

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.5672

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
WILLIAM HART

Mailing Address 50 FREEMAN AVE

City State Zip Code
EVERETT MA 02149

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

Name of Employer Occupation
MASS ASSOCIATION COMMUNITY COLLEGE VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 21 / 2014

Transaction ID : SA11AI.5674

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DORIS HEARTY

Mailing Address 27 SILVER HILL RD

City State Zip Code
WESTON MA 02493

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5684

Amount of Each Receipt this Period
2600.00

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

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

3600.00

**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 40 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) DAVID HERRO		Date of Receipt M M / D D / Y Y Y Y 02 / 19 / 2014	
Mailing Address 65 E GOETHE 3W 3W		Transaction ID : SA11AI.5695	
City CHICAGO	State IL	Zip Code 60610	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer HALP	Occupation INV MGMT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) DAVID HERRO		Date of Receipt M M / D D / Y Y Y Y 02 / 19 / 2014	
Mailing Address 65 E GOETHE 3W 3W		Transaction ID : SA11AI.5696	
City CHICAGO	State IL	Zip Code 60610	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer HALP	Occupation INV MGMT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) LUCILE HICKS		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 5 WILDWOOD ROAD		Transaction ID : SA11AI.5702	
City WAYLAND	State MA	Zip Code 01778	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer REITRED	Occupation REITRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	6200.00
TOTAL This Period (last page this line number only).....	6200.00

**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 41 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
RICHARD HILL

Mailing Address 10 LONGWOOD DR APT 370

City WESTWOOD State MA Zip Code 02090

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.5704

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
WILLIAM HOFMANN

Mailing Address 223 RUTLEDGE RD.

City BELMONT State MA Zip Code 02478

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

Name of Employer INSURANCE AGENT Occupation SELF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.5712

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
ARTHUR HORGAN

Mailing Address 8 RAMSAY RD

City MARBLEHEAD State MA Zip Code 01945

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.5718

Amount of Each Receipt this Period
 250.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 42 OF 154
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ELIZABETH HOSKINS

Mailing Address 85 E. INDIA ROW UNIT 20 A/B

City BOSTON State MA Zip Code 02110

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 08 / 2014

Transaction ID : SA11AI.5720

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM HOSKINS

Mailing Address 85 E. INDIA ROW UNIT 20 A/B

City BOSTON State MA Zip Code 02110

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

Name of Employer Occupation
 HOSKINS & ASSOCIATES EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.5722

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM HOSKINS

Mailing Address 85 E. INDIA ROW UNIT 20 A/B

City BOSTON State MA Zip Code 02110

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

Name of Employer Occupation
 HOSKINS & ASSOCIATES EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.5723

Amount of Each Receipt this Period
 2000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 43 OF 154
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JONATHON S JACOBSON

Mailing Address 200 CLARENDON ST
59TH FLOOR

City State Zip Code
BOSTON MA 02117

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

Name of Employer Occupation
HIGHFIELDS CAPITAL CEO & FOUNDER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5754

Amount of Each Receipt this Period
5200.00

B. Full Name (Last, First, Middle Initial)
JONATHON S JACOBSON

Mailing Address 200 CLARENDON ST
59TH FLOOR

City State Zip Code
BOSTON MA 02117

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

Name of Employer Occupation
HIGHFIELDS CAPITAL CEO & FOUNDER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5755

Amount of Each Receipt this Period
-2600.00
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
JONATHON S JACOBSON

Mailing Address 200 CLARENDON ST
59TH FLOOR

City State Zip Code
BOSTON MA 02117

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

Name of Employer Occupation
HIGHFIELDS CAPITAL CEO & FOUNDER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5756

Amount of Each Receipt this Period
2600.00
REDESIGNATION TO GENERAL

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

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

5200.00

**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 44 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
STEPHEN JEFFRIES

Mailing Address 12 BRIMMER STREET

City State Zip Code
BOSTON MA 02108

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

Name of Employer Occupation
S. B. JEFFRIES CONSULTANTS PRIVATE INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 12 / 2014

Transaction ID : SA11AI.5760

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
PATRICK JORDAN

Mailing Address 99 BELMONT STREET

City State Zip Code
READING MA 01867

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

Name of Employer Occupation
NEWTON-WELLESLEY HOSPITAL CHIEF OPERATING OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5778

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ARTHUR KAHN

Mailing Address 222 MOUNTAIN AVE.

City State Zip Code
MALDEN MA 02148

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

Name of Employer Occupation
SELF GEMOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.5782

Amount of Each Receipt this Period
250.00

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

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

1250.00

**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 45 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BRIAN KAVOOGIAN

Mailing Address 16 ALBION ROAD

City State Zip Code
WELLESLEY MA 02481

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

Name of Employer Occupation
CHARLES RIVER REALTY INVESTORS INVESTMENT MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 05 / 2014

Transaction ID : SA11AI.5790

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
PAUL KEENAN

Mailing Address 173 PLEASANT ST.
UNIT 401

City State Zip Code
CAMBRIDGE MA 02139

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

Name of Employer Occupation
HARVARD UNIVERSITY FUNDRAISER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 30 / 2014

Transaction ID : SA11AI.5796

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
TRISHA KENNEALY

Mailing Address 4 BRENT ROAD

City State Zip Code
LEXINGTON MA 02420

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

Name of Employer Occupation
ARTISTRY INNKEEPER/OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5808

Amount of Each Receipt this Period
2600.00

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

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

3350.00

**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 46 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ELIZABETH KENT

Mailing Address **3 HERRICK RD**

City **LYNNFIELD** State **MA** Zip Code **01940**

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

Name of Employer **TARPEY INSURANCE GROUP INC** Occupation **INSURANCE AGENCY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5812

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. THOMAS KERSHAW

Mailing Address **84 BEACON ST.**

City **BOSTON** State **MA** Zip Code **02108**

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

Name of Employer **HAMPSHIRE HOUSE CORPORATION** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 03 / 2014

Transaction ID : SA11AI.5816

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JOHN KINGSTON

Mailing Address **16 WINCHESTER STREET**

City **WINCHESTER** State **MA** Zip Code **01890**

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

Name of Employer **AMG** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.5826

Amount of Each Receipt this Period
1000.00

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 47 OF 154
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ANTHONY KLEIN

Mailing Address 11 FOSTER ST

City State Zip Code
MARBLEHEAD MA 01945

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

Name of Employer Occupation
THERMAL CIRCUITS PRESIDENT AND CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2014

Transaction ID : SA11AI.5832

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
ASHLEY KORB

Mailing Address 26 MAIN ST

City State Zip Code
LYNNFIELD MA 01940

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

Name of Employer Occupation
TISEI CONGRESSIONAL COMMITTEE FUNDRAISING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014

Transaction ID : SA11AI.4930

Amount of Each Receipt this Period
 95.61

IN-KIND: OFFICE SUPPLIES

C. Full Name (Last, First, Middle Initial)
DAVID LANE

Mailing Address 55R JOHN WISE AVE.

City State Zip Code
ESSEX MA 01929

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

Name of Employer Occupation
SELF RISK MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2014

Transaction ID : SA11AI.5864

Amount of Each Receipt this Period
 500.00

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

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

3195.61

**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 48 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) ROBERT LAPPIN		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 21 / 2014
Mailing Address 60 LITTLES POINT		Transaction ID : SA11AI.5866
City SWAMPSCOTT	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SHETLAND PROPERTIES, INC.	Occupation PRESIDENT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) JACQUELINE LAWLOR		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 225 BIRCH STREET		Transaction ID : SA11AI.5872
City ABINGTON	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer RETROFIT TECHNOLOGIES, INC.	Occupation SALES	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) TIM LAWLOR		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 60 ROCKYHILL RD		Transaction ID : SA11AI.5874
City PLYMOUTH	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer RETROFIT TECHNOLOGIES	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

SUBTOTAL of Receipts This Page (optional).....	5250.00
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: (check only one)	PAGE 49 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DENISE LEONARD

Mailing Address **30 PARKSIDE PLACE**
APT. 618

City **MALDEN** State **MA** Zip Code **02148**

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

Name of Employer **PATRIOT COMMUNITY BANK** Occupation **COMPLIANCE OFFICER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 25 / 2014

Transaction ID : SA11AI.5886

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
LORENZO LEPORE

Mailing Address **101 MAIN ST.**
#206

City **MEDFORD** State **MA** Zip Code **02155**

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

Name of Employer **SELF** Occupation **DENTIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 10 / 2014

Transaction ID : SA11AI.5890

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. PAUL LEVY

Mailing Address **84 HIGH ST**
STE 204

City **MEDFORD** State **MA** Zip Code **02155-3844**

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

Name of Employer **SELF** Occupation **PERIODONTIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11AI.5894

Amount of Each Receipt this Period
500.00

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

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

1500.00

**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 50 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DAVID LINDBERGH

Mailing Address 70 DIVIDENCE ROAD

City State Zip Code
READING MA 01867

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

Name of Employer Occupation
HOOKE LABORATORIES, INC. MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.5906

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. THOMAS J LITLE

Mailing Address 900 CHELMSFORD STREET

City State Zip Code
LOWELL MA 01851

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

Name of Employer Occupation
LITLE & CO MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.5918

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. THOMAS J LITLE

Mailing Address 900 CHELMSFORD STREET

City State Zip Code
LOWELL MA 01851

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

Name of Employer Occupation
LITLE & CO MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5919

Amount of Each Receipt this Period
2000.00

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

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

3000.00

**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 51 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
RICHARD LITTLE

Mailing Address 177 DUTHCER ST

City HOPEDALE State MA Zip Code 01747

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

Name of Employer RETROFIT TECHNOLOGIES INC, Occupation CTO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5921

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
AIMEE LOCKE

Mailing Address 601 CONTOUR DRIVE

City SAN ANTONIO State TX Zip Code 78212

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.5925

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
KENT LUCKEN

Mailing Address 65 FELLSMERE ROAD

City NEWTON State MA Zip Code 02459

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

Name of Employer CITI Occupation MANAGING DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.5939

Amount of Each Receipt this Period
 250.00

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

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

2250.00

**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 52 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MICHAEL LUCY		Date of Receipt M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 10 WALLIS DR		Transaction ID : SA11AI.5941
City WENHAM	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF	Occupation ENERGY CONSULTANT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. KATHLEEN MALCOLM		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 86 HOLYOKE ST		Transaction ID : SA11AI.5972
City LYNN	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation ACCOUNTANT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. DR. JOSE MARCAL		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 10 PLYMOUTH ROAD		Transaction ID : SA11AI.5992
City LEXINGTON	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF	Occupation PHYSICIAN	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 53 OF 154
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PAUL MARCUS

Mailing Address **75 PARK PLAZA**

City **BOSTON** State **MA** Zip Code **02116**

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

Name of Employer **DAVIS MARCUS PARTNERS INC.** Occupation **PRESIDENT & OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.5998

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
GEORGE MARKOS

Mailing Address **1 LONGMEADOW DRIVE**

City **IPSWICH** State **MA** Zip Code **01938**

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

Name of Employer **YELL-O-GLOW CORP** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.5999

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
GEORGE MARKOS

Mailing Address **1 LONGMEADOW DRIVE**

City **IPSWICH** State **MA** Zip Code **01938**

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

Name of Employer **YELL-O-GLOW CORP** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.6000

Amount of Each Receipt this Period
-2000.00
 REDESIGNATION FROM PRIMARY

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

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

3100.00

**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 54 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GEORGE MARKOS

Mailing Address **1 LONGMEADOW DRIVE**

City **IPSWICH** State **MA** Zip Code **01938**

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

Name of Employer **YELL-O-GLOW CORP** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.6001

Amount of Each Receipt this Period
2000.00
 REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
JOHN MARKOS

Mailing Address **250 BEACHAM ST.**

City **EVERETT** State **MA** Zip Code **02149**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 21 / 2014

Transaction ID : SA11AI.6003

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
BRAD MARSTON

Mailing Address **90 BEACON STREET
UNIT 2**

City **BOSTON** State **MA** Zip Code **02108**

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

Name of Employer **FOURTIER STRATEGIES, LLC** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 20 / 2014

Transaction ID : SA11AI.6009

Amount of Each Receipt this Period
250.00

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

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

4850.00

**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 55 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN MARTIN

Mailing Address **37 DEXTER STREET**

City **PEABODY** State **MA** Zip Code **01960**

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

Name of Employer **MBTA** Occupation **ELECTRICAL ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.6014

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
DESIREE MASALEHDAN

Mailing Address **50 MONARCH PATH**

City **GROTON** State **MA** Zip Code **01450**

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

Name of Employer **TRANS MED USA INS** Occupation **INSURANCE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.6019

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MICHAEL MASSEY

Mailing Address **165 MT VERNON ST**

City **BOSTON** State **MA** Zip Code **92108**

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

Name of Employer **MASSEY & CO** Occupation **REAL ESTATE INVESTMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.6023

Amount of Each Receipt this Period
5200.00

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

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

5850.00

**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 56 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MICHAEL MASSEY		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2014
Mailing Address 165 MT VERNON ST		Transaction ID : SA11AI.6024
City BOSTON	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2600.00
Name of Employer MASSEY & CO	Occupation REAL ESTATE INVESTMENT	REDESIGNATION FROM PRIMARY
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) B. MICHAEL MASSEY		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2014
Mailing Address 165 MT VERNON ST		Transaction ID : SA11AI.6025
City BOSTON	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer MASSEY & CO	Occupation REAL ESTATE INVESTMENT	REDESIGNATION TO GENERAL
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) C. MR. GEORGE MAVRIDIS		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 29 / 2014
Mailing Address 202 BROOKSBY VILLAGE DRIVE #308		Transaction ID : SA11AI.6037
City PEABODY	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	250.00
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: (check only one)	PAGE 57 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
TERENCE MCGINNIS

Mailing Address **24 COBB LANE**

City **LYNN** State **MA** Zip Code **01904**

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

Name of Employer **EASTERN BANK** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 01 / 2014

Transaction ID : SA11AI.6062

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MIKE MESKIN

Mailing Address **45 WELLESLEY RD**

City **BELMONT** State **MA** Zip Code **02478**

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

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE INVESTMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.6095

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
PETER MONACO

Mailing Address **311 MARLBOROUGH STREET**

City **BOSTON** State **MA** Zip Code **02116**

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

Name of Employer **RAPTOR GROUP HOLDINGS** Occupation **INVESTMENTS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 30 / 2014

Transaction ID : SA11AI.6109

Amount of Each Receipt this Period
2600.00

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

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

3350.00

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

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

FOR LINE NUMBER: PAGE 58 OF 154
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WILLIAM V MONAGLE JR

Mailing Address 1 LANTHORN LANE

City State Zip Code
BEVERLY MA 01915

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

Name of Employer Occupation
BOSE CORP PURCHASING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 29 / 2014

Transaction ID : SA11A1.6111

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
THOMAS MORIARTY

Mailing Address 11 SYCAMORE RD

City State Zip Code
NORTH QUINCY MA 02171

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

Name of Employer Occupation
MARCUS, ERNICO, EMMER & BROOKS ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11A1.6127

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT MORLEY

Mailing Address 8 PARK STREET

City State Zip Code
WAKEFIELD MA 01880

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11A1.6129

Amount of Each Receipt this Period
500.00

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

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

1250.00

**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 59 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. GUY MORSE

Mailing Address **279 CAMBRIDGE STREET**
UNIT 1A

City **BURLINGTON** State **MA** Zip Code **01803**

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

Name of Employer **SELF** Occupation **HAIR DESIGNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11AI.6135

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
GERARD MOYNIHAN

Mailing Address **25 MARSHALL STREET**

City **NORTH READING** State **MA** Zip Code **01864**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.6141

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MRS. HILDA MOYNIHAN

Mailing Address **34 DONCASTER CIR.**

City **LYNNFIELD** State **MA** Zip Code **01940**

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

Name of Employer **TOWN OF LYNNFIELD** Occupation **SUBSTITUTE TEACHER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 15 / 2014

Transaction ID : SA11AI.6143

Amount of Each Receipt this Period
250.00

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

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

750.00

**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 60 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PETER MURLEY

Mailing Address 30 AUTUMN LANE

City SOUTH HAMILTON State MA Zip Code 01982

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

Name of Employer STRATEGIC PRODUCTS AND SERVICES, LLC Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : SA11AI.6147

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
ANN MURPHY

Mailing Address 65 HELEN STREET

City WALTHAM State MA Zip Code 02452

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

Name of Employer O'NEILL AND ASSOCIATES Occupation SENIOR VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6149

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
JEANNE MURPHY

Mailing Address 14 SOUTH MOUNTAIN AVENUE

City MELROSE State MA Zip Code 02176

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

Name of Employer PAUL MURPHY INSURANCE Occupation BOOKKEEPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6151

Amount of Each Receipt this Period
 2500.00

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

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

4000.00

**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 61 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
FREDERICK MUZI

Mailing Address 10 POWISSET STREET

City DOVER State MA Zip Code 02030

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.6161

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
MR. DANIEL NAKAMOTO

Mailing Address 238 HIGHLAND AVE

City WINCHESTER State MA Zip Code 01890

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

Name of Employer NORTH AMERICAN FAMILY INSTITUTE Occupation MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6163

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
RONALD NATH

Mailing Address 6 CABOT STREET

City WINCHESTER State MA Zip Code 01890

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

Name of Employer COMMONWEALTH SURGICAL ASSOCIATES Occupation SURGEON

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2014

Transaction ID : SA11AI.6164

Amount of Each Receipt this Period
 250.00

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

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

800.00

**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 62 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN NESTOR

Mailing Address P.O. BOX 423
9 SAGAMORE RD

City IPSWICH State MA Zip Code 01938

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

Name of Employer AMESBURY PSYCHOLOGICAL CENTER INC Occupation LICENSED MENTAL HEALTH COUNSELOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 30 / 2014

Transaction ID : SA11AI.6166

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOHN NESTOR

Mailing Address P.O. BOX 423
9 SAGAMORE RD

City IPSWICH State MA Zip Code 01938

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

Name of Employer AMESBURY PSYCHOLOGICAL CENTER INC Occupation LICENSED MENTAL HEALTH COUNSELOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 06 / 2014

Transaction ID : SA11AI.6167

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
LUCAS NOBLE

Mailing Address 16 LINDEN RD

City GLOUCESTER State MA Zip Code 01930

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

Name of Employer LUCAS NOBLE FINANCIAL Occupation FINANCIAL REPRESENTATIVE/PLANNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 03 / 2014

Transaction ID : SA11AI.6177

Amount of Each Receipt this Period
250.00

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

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

750.00

**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 63 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. PAUL O'BRIEN		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 12 EMERALD STREET		Transaction ID : SA11AI.6187	
City WAKEFIELD	State MA	Zip Code 01880	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer SELF EMPLOYED	Occupation IT CONSULTANT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. DAVID O'NEIL		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 9 HERITAGE WAY		Transaction ID : SA11AI.6197	
City NORTH READING	State MA	Zip Code 01864	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer		Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. MARK ODERMAN		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014	
Mailing Address 8 ROLLESTON RD		Transaction ID : SA11AI.6201	
City MARBLEHEAD	State MA	Zip Code 01945	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer CSP ASSOCIATES, INC	Occupation SR MANAGER DIRECTOR		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

SUBTOTAL of Receipts This Page (optional).....	4600.00
TOTAL This Period (last page this line number only).....	4600.00

**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 64 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARK ODERMAN

Mailing Address 8 ROLLESTON RD

City State Zip Code
MARBLEHEAD MA 01945

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

Name of Employer Occupation
CSP ASSOCIATES, INC SR MANAGER DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.6202

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
ROBIN A ODERMAN

Mailing Address 8 ROLLESTON RD

City State Zip Code
MARBLEHEAD MA 01945

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.6204

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
ROBIN A ODERMAN

Mailing Address 8 ROLLESTON RD

City State Zip Code
MARBLEHEAD MA 01945

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.6205

Amount of Each Receipt this Period
2600.00

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

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

7800.00

**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 65 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HARRY OGDEN

Mailing Address 10 KETTLE WAY

City DRACUT State MA Zip Code 01826

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

Name of Employer MORTGAGE FINANCIAL Occupation MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6207

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
TED OWENS

Mailing Address 946 GREAT PLAIN AVE #124

City NEEDHAM State MA Zip Code 02492

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

Name of Employer SELF EMPLOYED Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.6223

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
RICHARD PENNA

Mailing Address 32 PARTRIDGE LN

City BOXFORD State MA Zip Code 01921

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

Name of Employer ARROW PAPER CORP Occupation SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 29 / 2014

Transaction ID : SA11AI.6246

Amount of Each Receipt this Period
 250.00

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

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

1000.00

**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 66 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
H. PERRY

Mailing Address **865 CENTRAL AVE**
APT K-109

City **NEEDHAM** State **MA** Zip Code **02492**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11AI.6248

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
NOLAN PREVITE

Mailing Address **460 COMMERCIAL STREET**

City **BOSTON** State **MA** Zip Code **02109**

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

Name of Employer **EBI** Occupation **CONSULTING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11AI.6260

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL PRISCO

Mailing Address **12 BISHOPS WAY**

City **NORTH READING** State **MA** Zip Code **01864**

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

Name of Employer **CAPRI PRIVATE EQUITIES** Occupation **COMMERCIAL PROPERTY MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.6263

Amount of Each Receipt this Period
1000.00

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

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

1500.00

**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 67 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LT. COL. MICHAEL PROFENNO

Mailing Address **2 SIDNEY ST**

City **WAKEFIELD** State **MA** Zip Code **01880**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11AI.6265

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ROBERT QUINN

Mailing Address **42 BENTON CIRCLE**

City **READING** State **MA** Zip Code **01867**

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

Name of Employer **SELF** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 21 / 2014

Transaction ID : SA11AI.6273

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
HENRI RAUSCHENBACH

Mailing Address **PO BOX 1064**

City **BREWSTER** State **MA** Zip Code **02631**

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

Name of Employer **SELF EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 27 / 2014

Transaction ID : SA11AI.6281

Amount of Each Receipt this Period
1000.00

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

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

1500.00

**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 68 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WARREN A RAZZABONI SR

Mailing Address 12 HAZEL STREET

City Hollis State NH Zip Code 03049

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6287

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
MR. WAYNE A RAZZABONI

Mailing Address 18 VILLAGE ROAD

City PeppereLL State MA Zip Code 01463

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

Name of Employer NATIONAL COMPUTER DIRECT Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6290

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
MR. WAYNE A RAZZABONI

Mailing Address 18 VILLAGE ROAD

City PeppereLL State MA Zip Code 01463

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

Name of Employer NATIONAL COMPUTER DIRECT Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6291

Amount of Each Receipt this Period
 -500.00
 REDESIGNATION FROM PRIMARY

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

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

1000.00

**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 69 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. WAYNE A RAZZABONI

Mailing Address 18 VILLAGE ROAD

City State Zip Code
PEPPERELL MA 01463

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

Name of Employer Occupation
NATIONAL COMPUTER DIRECT PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3100.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.6292

Amount of Each Receipt this Period
500.00
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
GEOFFREY REHNERT

Mailing Address 101 HUNTINGTON AVE -FLOOR 23

City State Zip Code
BOSTON MA 02199

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

Name of Employer Occupation
AUDAX GROUP CO-CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.6296

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
PATRICIA RESNICK

Mailing Address 11 STAFFORD RD

City State Zip Code
LYNNFIELD MA 01940

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

Name of Employer Occupation
BOSTON BEAUTY SUPPLY BOOKKEEPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.6298

Amount of Each Receipt this Period
500.00

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

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

3600.00

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

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

FOR LINE NUMBER: PAGE 70 OF 154
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LAURA REYNOLDS

Mailing Address 153 GARFIELD RD.

City State Zip Code
CONCORD MA 01742

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6300

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
ROBERT REYNOLDS

Mailing Address 153 GARFIELD RD

City State Zip Code
CONCORD MA 01742

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

Name of Employer Occupation
PUTNAM INVESTMENTS EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6302

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
EVELYN L ROCKAS

Mailing Address 10 MIRABEAU LN EXT

City State Zip Code
LYNNFIELD MA 01940

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6862

Amount of Each Receipt this Period
 250.00

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

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

5450.00

**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 71 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. DR. GRANT RODKEY		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2014	
Mailing Address 24 MARCIA RD.		Transaction ID : SA11AI.6333	
City WATERTOWN	State MA	Zip Code 02472	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 200.00	
Name of Employer VA BOSTON HEALTHCARE SYSTEM		Occupation SURGEON	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) B. MR. ROBERT ROTONDI		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 67 ORCHARD LANE		Transaction ID : SA11AI.6346	
City MELROSE	State MA	Zip Code 02176	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2500.00	
Name of Employer D&R PAVING		Occupation OWNER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) C. VICTOR SALDANHA		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 20 EDGEMERE RD		Transaction ID : SA11AI.6372	
City LYNNFIELD	State MA	Zip Code 01940	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer CAMBRIDGE HEALTH ALLIANCE		Occupation PHYSICIAN	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	2950.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 72 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) ERVEN SAMSEL		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 175 PECUNIT STREET		Transaction ID : SA11AI.6376
City CANTON	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF-EMPLOYED	Occupation CONSULTANT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) MR. FRED SANTANGELO		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 5 TOPHET RD.		Transaction ID : SA11AI.6379
City LYNNFIELD	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) FRANK SATERIALE		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 8 JORDAN TERRACE		Transaction ID : SA11AI.6387
City WAKEFIELD	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1350.00
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: (check only one)	PAGE 73 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
REBECCA SCHIFF

Mailing Address 31 DECK STREET

City State Zip Code
JAMESTOWN RI 02835

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

Name of Employer Occupation
HARVARD UNIVERSITY DEVELOPMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.6403

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JOHN SCOTT

Mailing Address PO BOX 511

City State Zip Code
READING MA 01867

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

Name of Employer Occupation
SELF-EMPLOYED GUTTER REPAIR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6411

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ROGER T SERVISON

Mailing Address 59 CODMAN RD

City State Zip Code
BROOKLINE MA 02445

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6417

Amount of Each Receipt this Period
1000.00

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

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

1750.00

**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 74 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
FRANK SESTITO

Mailing Address 1 MUNROE ST

City SOMERVILLE State MA Zip Code 02143

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.6419

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
RALPH W SEVINOR

Mailing Address 424 ESSEX ST

City LYNN State MA Zip Code 01902

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : SA11AI.6420

Amount of Each Receipt this Period
 1234.56

C. Full Name (Last, First, Middle Initial)
RALPH W SEVINOR

Mailing Address 424 ESSEX ST

City LYNN State MA Zip Code 01902

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : SA11AI.6421

Amount of Each Receipt this Period
 -1234.55
 REDESIGNATION FROM PRIMARY

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

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

250.01

**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 75 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
RALPH W SEVINOR

Mailing Address 424 ESSEX ST

City LYNN State MA Zip Code 01902

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3834.55

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : SA11AI.6422

Amount of Each Receipt this Period
 1234.55
 REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
MR. BRIAN SHEA

Mailing Address 7 DAVENTRY CT.

City LYNNFIELD State MA Zip Code 01940

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

Name of Employer Occupation
TH GLENNON CO MANUFACTURING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6432

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN J SHEEHAN

Mailing Address 16 ORCHARD LANE

City LYNNFIELD State MA Zip Code 01940

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6438

Amount of Each Receipt this Period
 250.00

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

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

1984.55

**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 76 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ALLEN SMITH

Mailing Address 65 ALDERBROOK DRIVE

City State Zip Code
TOPSFIELD MA 01983

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

Name of Employer Occupation
BRIGHAM AND WOMEN'S PHYSICIANS ORG/ PHYSICIAN EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 30 / 2014

Transaction ID : SA11AI.6452

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
PETER SMYTH

Mailing Address 56 RUSSELL STREET

City State Zip Code
MILTON MA 02186

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

Name of Employer Occupation
GREATER MEDIA, INC. PRESIDENT/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.6463

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
SCOTT SOLOMBRINO

Mailing Address PO BOX 46

City State Zip Code
HAMILTON MA 01946

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

Name of Employer Occupation
DAV MASS CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.6471

Amount of Each Receipt this Period
2000.00

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

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

3000.00

**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 77 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
STEVEN SOLOMON

Mailing Address 11 BRIDGE ST

City State Zip Code
MARBLEHEAD MA 01945

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

Name of Employer Occupation
SOLOMON METALS CORP BUSINESSMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.6476

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ROBERT SPELLMAN

Mailing Address 16 LITTLE POND ROAD

City State Zip Code
MERRIMAC MA 01860

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

Name of Employer Occupation
SPELLMAN TRAVEL PARTNERS SMALL BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : SA11AI.6480

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ROBERT SPELLMAN

Mailing Address 16 LITTLE POND ROAD

City State Zip Code
MERRIMAC MA 01860

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

Name of Employer Occupation
SPELLMAN TRAVEL PARTNERS SMALL BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 14 / 2014

Transaction ID : SA11AI.6481

Amount of Each Receipt this Period
100.00

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

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

2100.00

**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 78 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. AARON SPENCER

Mailing Address 100 CHARLES PARK ROAD

City WEST ROXBURY State MA Zip Code 02132

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 29 / 2014

Transaction ID : SA11AI.6483

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
RAY STATA

Mailing Address 6 MILLER HILL ROAD

City DOVER State MA Zip Code 02030

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

Name of Employer CHAIRMAN Occupation ANALOG DEVICES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6502

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
KRISTIN STEENBRUGGEN

Mailing Address 29 EDGEMONT AVE

City READING State MA Zip Code 01867

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6510

Amount of Each Receipt this Period
 5000.00

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

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

6500.00

**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 79 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
KRISTIN STEENBRUGGEN

Mailing Address 29 EDGEMONT AVE

City READING State MA Zip Code 01867

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

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **2600.00**

Date of Receipt: **03 / 31 / 2014**

Transaction ID : SA11AI.6511

Amount of Each Receipt this Period: **-2400.00**
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
KRISTIN STEENBRUGGEN

Mailing Address 29 EDGEMONT AVE

City READING State MA Zip Code 01867

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

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **5000.00**

Date of Receipt: **03 / 31 / 2014**

Transaction ID : SA11AI.6512

Amount of Each Receipt this Period: **2400.00**
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
CAMPBELL STEWARD

Mailing Address 65 ASBURY ST

City TOPSFIELD State MA Zip Code 01983

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

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **1000.00**

Date of Receipt: **03 / 06 / 2014**

Transaction ID : SA11AI.6514

Amount of Each Receipt this Period: **1000.00**

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

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

1000.00

**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 80 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. THOMAS C STRAIN

Mailing Address 219 COLLEGE HGWY

City SOUTHAMPTON State MA Zip Code 01073

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.6523

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
MICHAEL SWEAT

Mailing Address 91 SPOFFORD STREET

City GEORGETOWN State MA Zip Code 01833

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

Name of Employer Occupation
 ODYSSEY SYSTEMS CONSULTING GROUP, CHAIRMAN, GOVERNMENT SERVICES FIRM

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.6540

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
MICHAEL SWEAT

Mailing Address 91 SPOFFORD STREET

City GEORGETOWN State MA Zip Code 01833

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

Name of Employer Occupation
 ODYSSEY SYSTEMS CONSULTING GROUP, CHAIRMAN, GOVERNMENT SERVICES FIRM

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6541

Amount of Each Receipt this Period
 500.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 81 OF 154
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
THOMAS SZOLD

Mailing Address 2005 COLUMBIA PIKE
APT 825

City ARLINGTON State VA Zip Code 22204

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

Name of Employer DCI GROUP Occupation PUBLIC AFFAIRS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 05 / 2014

Transaction ID : SA11AI.6547

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
LORETTA TENAGLIA

Mailing Address 101 BROOKSBY VILLAGE DR
APT 111

City PEABODY State MA Zip Code 01960

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6559

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
LORETTA TENAGLIA

Mailing Address 101 BROOKSBY VILLAGE DR
APT 111

City PEABODY State MA Zip Code 01960

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6560

Amount of Each Receipt this Period
200.00

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

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

700.00

**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 82 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
FREDERICK G.P. THORNE

Mailing Address 94 BRIDGE STREET

City State Zip Code
MANCHESTER MA 01944

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.6570

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
BEVERLY TISEI

Mailing Address 701 MAIN ST.

City State Zip Code
WAKEFIELD MA 01880

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

Name of Employer Occupation
AMERICAN HOME INSPECTION OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6580

Amount of Each Receipt this Period
 600.00

C. Full Name (Last, First, Middle Initial)
MIKE TORRISI

Mailing Address 38 HIGH STREET

City State Zip Code
ANDOVER MA 01810

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

Name of Employer Occupation
CSP ASSOCIATES CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : SA11AI.6584

Amount of Each Receipt this Period
 500.00

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

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

2100.00

**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 83 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MRS. POLLY TOWNSEND

Mailing Address **34 PROCTOR STREET**

City **MANCHESTER** State **MA** Zip Code **01944**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.6586

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JOYCE TREMBLAY

Mailing Address **13 ROWLAND ST**

City **MARBLEHEAD** State **MA** Zip Code **01945**

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

Name of Employer **GENESIS MANAGEMENT GROUP** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.6594

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
RICHARD L TREMBOWICZ

Mailing Address **6 MOREL CIR**

City **WAKEFIELD** State **MA** Zip Code **01880-4235**

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

Name of Employer **MEDICAMETRIX, INC** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2800.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.6595

Amount of Each Receipt this Period
200.00

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

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

1700.00

**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 84 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
RICHARD L TREMBOWICZ

Mailing Address 6 MOREL CIR

City State Zip Code
WAKEFIELD MA 01880-4235

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

Name of Employer Occupation
MEDICAMETRIX, INC PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.6596

Amount of Each Receipt this Period
-200.00
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
RICHARD L TREMBOWICZ

Mailing Address 6 MOREL CIR

City State Zip Code
WAKEFIELD MA 01880-4235

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

Name of Employer Occupation
MEDICAMETRIX, INC PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2800.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.6597

Amount of Each Receipt this Period
200.00
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
JAMES E VESTA

Mailing Address 31 GROVE STREET

City State Zip Code
MERRIMAC MA 01860

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

Name of Employer Occupation
AFLAC INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 03 / 2014

Transaction ID : SA11AI.6620

Amount of Each Receipt this Period
500.00

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

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

500.00

**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 85 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PETER VOSS

Mailing Address **PO BOX 324**

City **SUNAPEE** State **NH** Zip Code **03782**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.6630

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
NATHANIEL WALTON

Mailing Address **22 IRVING ST
APT 5**

City **BOSTON** State **MA** Zip Code **02114**

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

Name of Employer **SACHEM STRATEGIES** Occupation **PRINCIPAL**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 26 / 2014

Transaction ID : SA11AI.6638

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BENJAMIN WEINER

Mailing Address **900 LYNNFIELD ST #35**

City **LYNNFIELD** State **MA** Zip Code **01940**

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

Name of Employer **RENLOW ASSOCIATES** Occupation **MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.6652

Amount of Each Receipt this Period
500.00

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

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

1500.00

**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 86 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LAWRENCE WEINER

Mailing Address **21 HILL STREET**

City **MALDEN** State **MA** Zip Code **02148**

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

Name of Employer **RENEW ASSOCIATES** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.6654

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM F WELD

Mailing Address **35 ASH ST**

City **CAMBRIDGE** State **MA** Zip Code **02138-4840**

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

Name of Employer **MINTZ LEVIN** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.6656

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ROBERT WHITE

Mailing Address **23 CHADWICK ROAD**

City **WESTON** State **MA** Zip Code **02493**

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

Name of Employer **INSTITUTE OF POLITICS** Occupation **EDUCATION**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.6661

Amount of Each Receipt this Period
5200.00

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

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

6700.00

**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 87 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. ROBERT WHITE		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 23 CHADWICK ROAD		Transaction ID : SA11AI.6662
City WESTON State MA Zip Code 02493	Amount of Each Receipt this Period -2600.00 REDESIGNATION FROM PRIMARY	
FEC ID number of contributing federal political committee. C	Name of Employer INSTITUTE OF POLITICS Occupation EDUCATION	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) B. ROBERT WHITE		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 23 CHADWICK ROAD		Transaction ID : SA11AI.6663
City WESTON State MA Zip Code 02493	Amount of Each Receipt this Period 2600.00 REDESIGNATION TO GENERAL	
FEC ID number of contributing federal political committee. C	Name of Employer INSTITUTE OF POLITICS Occupation EDUCATION	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) C. JOHN WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 50 CHESTNUT STREET		Transaction ID : SA11AI.6673
City LYNNFIELD State MA Zip Code 01940	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Name of Employer SELF Occupation DIRECTOR/PERFORMER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00

**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 88 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CHARLES WILS

Mailing Address **7 SMITH FARM TRAIL**

City **LYNNFIELD** State **MA** Zip Code **01940**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.6675

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
NICHOLAS XENOS

Mailing Address **12 WESTFORD STREET**

City **CHELMSFORD** State **MA** Zip Code **01824**

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

Name of Employer Occupation
GENERAL ELECTRIC COMPANY **MACHINE OPERATOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
02 / 27 / 2014

Transaction ID : SA11AI.6687

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
NICHOLAS XENOS

Mailing Address **12 WESTFORD STREET**

City **CHELMSFORD** State **MA** Zip Code **01824**

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

Name of Employer Occupation
GENERAL ELECTRIC COMPANY **MACHINE OPERATOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
03 / 27 / 2014

Transaction ID : SA11AI.6688

Amount of Each Receipt this Period
 500.00

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

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

1250.00

**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 89 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOSEPH YANCHIK

Mailing Address 49 BRISTOL ROAD

City State Zip Code
WELLESLEY MA 02481

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

Name of Employer Occupation
AILERON THERAPEUTICS, INC. EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.6690

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER YOUNG

Mailing Address 3 BATTERY WHARF #3502

City State Zip Code
BOSTON MA 02109

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

Name of Employer Occupation
MSA MORTGAGE LLC MORTGAGE BANKING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 03 / 2014

Transaction ID : SA11AI.6694

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER YOUNG

Mailing Address 3 BATTERY WHARF #3502

City State Zip Code
BOSTON MA 02109

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

Name of Employer Occupation
MSA MORTGAGE LLC MORTGAGE BANKING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 03 / 2014

Transaction ID : SA11AI.6695

Amount of Each Receipt this Period
2400.00

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

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

5250.00

**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 90 OF 154
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARIA R YOUNG

Mailing Address **3 BATTERY WHARF
UNIT 3502**

City **BOSTON** State **MA** Zip Code **02109**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M / D D / Y Y Y Y
03 / 03 / 2014

Transaction ID : SA11AI.6697

Amount of Each Receipt this Period

2600.00

B. Full Name (Last, First, Middle Initial)
MARIA R YOUNG

Mailing Address **3 BATTERY WHARF
UNIT 3502**

City **BOSTON** State **MA** Zip Code **02109**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M / D D / Y Y Y Y
03 / 03 / 2014

Transaction ID : SA11AI.6698

Amount of Each Receipt this Period

2400.00

C. Full Name (Last, First, Middle Initial)
MS. MINDELYNN C YOUNG

Mailing Address **40 CENTRAL STREET
APT. 3**

City **BEVERLY** State **MA** Zip Code **01915**

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

Name of Employer **SCR AND ASSOCIATES** Occupation **FUNDRAISING CONSULTING**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M / D D / Y Y Y Y
03 / 14 / 2014

Transaction ID : SA11AI.6700

Amount of Each Receipt this Period

250.00

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

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

5250.00

205825.12

**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 91 OF 154
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITTEE (ABC PAC)

Mailing Address 440 FIRST STREET NW
SUITE 200

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11C.6731

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE

Mailing Address 121 N HENRY STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00010124

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11C.6719

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DISTILLED SPIRITS COUNCIL OF THE UNITED STATES INC POLITICAL ACTION COMMITTEE

Mailing Address 1250 EYE ST., NW #400

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00030734

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11C.6716

Amount of Each Receipt this Period
500.00

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

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

3500.00

**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 92 OF 154
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GOP GENERATION Y FUND

Mailing Address **PO BOX 9055**

City **PEORIA** State **IL** Zip Code **61612**

FEC ID number of contributing federal political committee. **C C00448191**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.6718

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)
INVEST IN A STRONG AND SECURE AMERICA - ISSA PAC

Mailing Address **PO BOX 3799**

City **VISTA** State **CA** Zip Code **92085**

FEC ID number of contributing federal political committee. **C C00450320**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.6735

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
IRL PAC

Mailing Address **P.O. BOX 901233**

City **HOMESTEAD** State **FL** Zip Code **33090**

FEC ID number of contributing federal political committee. **C C00402982**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 12 / 2014

Transaction ID : SA11C.6712

Amount of Each Receipt this Period

2000.00

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

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

9500.00

**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 93 OF 154
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" 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)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN S FUND

Mailing Address **PO BOX 853**

City **EDWARDSVILLE** State **IL** Zip Code **62025**

FEC ID number of contributing federal political committee. **C C00390831**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.6725

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC

Mailing Address **1605 KING STREET**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00089458**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.6729

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS

Mailing Address **317 MASSACHUSETTS AVENUE, NE
1ST FLOOR**

City **WASHINGTON** State **DC** Zip Code **20002**

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11C.6714

Amount of Each Receipt this Period

5000.00

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

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

7000.00

**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 94 OF 154
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PROSPERITY ACTION INC.

Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00377689**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11C.6727

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
REPUBLICAN MAIN STREET PAC

Mailing Address 1220 L STREET NW
SUITE 100-263

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00165159**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 06 / 2014

Transaction ID : SA11C.6710

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
REPUBLICAN MAJORITY FOR CHOICE

Mailing Address 1900 L STREET NW
SUITE 614

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00346635**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11C.6723

Amount of Each Receipt this Period
 1000.00

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

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

11000.00

**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 95 OF 154
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Mailing Address 1325 G STREET, N.W. SUITE 1000

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00109306

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11C.6733

Amount of Each Receipt this Period
1000.00

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

Mailing Address 5631 ABERDEEN RD

City State Zip Code
FAIRWAY KS 66205

FEC ID number of contributing federal political committee. **C** C00497305

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11C.6721

Amount of Each Receipt this Period
1000.00

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).....

2000.00

33000.00

**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 96 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JUAN M AGUILO-GARLAND

Mailing Address 350 NW 70TH AVE STE B

City PLANTATION State FL Zip Code 33317

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6850

Amount of Each Receipt this Period
 50.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
WILLIAM C ALLEN

Mailing Address 1916 17TH ST NW APT 1

City WASHINGTON State DC Zip Code 20009

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

Name of Employer Occupation
 KERES CONSULTING, INC. CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6781

Amount of Each Receipt this Period
 25.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
GREGORY ANGELO

Mailing Address 1444 RHODE ISLAND AVE NW APT 709

City WASHINGTON State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6813

Amount of Each Receipt this Period
 150.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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 97 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) DAVID BLACK		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 920 I ST NW #612		Transaction ID : SA12.6756	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Receipt this Period _____ 125.00 JFC TRANSFER-EQUALITY LEADERSHIP FUND [MEMO ITEM]
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer UNION PACIFIC CORP	Occupation DEPUTY DIRECTOR - WASHINGTON AFFAIR		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 125.00 _____		

Full Name (Last, First, Middle Initial) DONALD R BRAMER		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 1512 NEAL ST NE		Transaction ID : SA12.6831	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Receipt this Period _____ 50.00 JFC TRANSFER-EQUALITY LEADERSHIP FUND [MEMO ITEM]
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 50.00 _____		

Full Name (Last, First, Middle Initial) JACOB BROUWER		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 1508 W MISSION RD		Transaction ID : SA12.6746	
City ESCONDIDO	State CA	Zip Code 92029	Amount of Each Receipt this Period _____ 500.00 JFC TRANSFER-EQUALITY LEADERSHIP FUND [MEMO ITEM]
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer SUPERIOR READY MIX CONCRETE	Occupation OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00 _____		

SUBTOTAL of Receipts This Page (optional).....	_____ 0.00 _____
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: (check only one)	PAGE 98 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
BROWARD LOG CABIN CLUB

Mailing Address PO BOX 1281

City FT LAUDERDALE State FL Zip Code 33324

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6768

Amount of Each Receipt this Period
125.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
BROOKS A BRUNSON

Mailing Address 138 QUINCY PL NE #4

City WASHINGTON State DC Zip Code 20002

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

Name of Employer Occupation
BROWNSTEIN HYATT FARBER SCHRECK GOVERNMENT RELATIONS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6802

Amount of Each Receipt this Period
50.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
LUKE BURKE

Mailing Address 1818 RIGGS PL NW APT 205

City WASHINGTON State DC Zip Code 20009

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

Name of Employer Occupation
COMMITTEE ON HOMELAND SECURITY PROFESSIONAL STAFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6764

Amount of Each Receipt this Period
25.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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 99 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LUIS M CABALLERO

Mailing Address 1911 SW 33RD CT

City MIAMI State FL Zip Code 33145

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **37.50**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6846

Amount of Each Receipt this Period
37.50

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
KEVIN CAIN

Mailing Address 2125 14TH ST NW UNIT 714

City WASHINGTON State DC Zip Code 20009

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

Name of Employer Occupation
 ASSOCIATION OF AMERICAN VETERINARY I DIRECTOR, GOVERNMENT RELATIONS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6762

Amount of Each Receipt this Period
50.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
RICHARD CANTOR

Mailing Address 2326 CALIFORNIA ST NW

City WASHINGTON State DC Zip Code 20008

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

Name of Employer Occupation
 THE GRIZZLE COMPANY ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **125.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6739

Amount of Each Receipt this Period
125.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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 100 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HEATH H CLAYTON

Mailing Address 624 MARYLAND AVE NW APT 4

City WASHINGTON State DC Zip Code 20002

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6823

Amount of Each Receipt this Period
 25.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
BENJAMIN S COLE

Mailing Address 1418 W ST NW #506

City WASHINGTON State DC Zip Code 20009

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6815

Amount of Each Receipt this Period
 50.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JAMES J CONNORS

Mailing Address 637 VASSAR RD

City WAYNE State PA Zip Code 19087

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

Name of Employer Occupation
 AMERICAN UNIVERSITY STUDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6766

Amount of Each Receipt this Period
 25.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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 101 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CORY J CROWLEY

Mailing Address 5937 FRANCONIA RD

City State Zip Code
ALEXANDRIA VA 22310

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6857

Amount of Each Receipt this Period
50.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SARAH E CUPP

Mailing Address 1401 S JOYCE ST APT 813

City State Zip Code
ARLINGTON VA 22202

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

Name of Employer Occupation
MERCURY RADIO ARTS TV HOST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
125.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6775

Amount of Each Receipt this Period
125.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JORGE L DIAZ

Mailing Address 1350 SW 122ND AVE APT 221

City State Zip Code
MIAMI FL 33184

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
75.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6842

Amount of Each Receipt this Period
75.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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 102 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DANIEL EHLERS

Mailing Address 631 23RD ST S

City ARLINGTON State VA Zip Code 22202

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6819

Amount of Each Receipt this Period
 25.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ANDREW EILTS

Mailing Address 770 P ST NW APT 406

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation
 US POLICY METRICS SENIOR ANALYST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6798

Amount of Each Receipt this Period
 50.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
EQUALITY LEADERSHIP FUND

Mailing Address 2470 DANIELLS BRIDGE RD STE 121

City ATHENS State GA Zip Code 30606

FEC ID number of contributing federal political committee. **C** C00551408

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6736

Amount of Each Receipt this Period
 16231.30

JFC TRANSFER - SEE MEMO ENTRIES

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

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

16231.30

**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 103 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
EQUALITY LEADERSHIP FUND

Mailing Address 2470 DANIELLS BRIDGE RD STE 121

City Athens State GA Zip Code 30606

FEC ID number of contributing federal political committee. **C** C00551408

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 155020.34

Date of Receipt 03 / 31 / 2014

Transaction ID : SA12.6737

Amount of Each Receipt this Period 3120.25

JFC TRANSFER - SEE MEMO ENTRIES

B. Full Name (Last, First, Middle Initial)
SERGE EYGENSON

Mailing Address 23 BUCKINGHAM LN

City Buffalo Grove State IL Zip Code 60089

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 25.00

Date of Receipt 03 / 31 / 2014

Transaction ID : SA12.6811

Amount of Each Receipt this Period 25.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ANDREW J FELZ

Mailing Address 314 SOUTH CAROLINA SE

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 25.00

Date of Receipt 03 / 31 / 2014

Transaction ID : SA12.6821

Amount of Each Receipt this Period 25.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

3120.25

**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 104 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
FRIENDS OF MARK FOLEY FOR CONGRESS

Mailing Address 1316 LAKE VICTORIA DRIVE

City LAKE WORTH State FL Zip Code 33461

FEC ID number of contributing federal political committee. **C** C00289140

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6771

Amount of Each Receipt this Period
 1000.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
STEVEN GIAIER

Mailing Address 1020 MONROE ST NW APT 307

City WASHINGTON State DC Zip Code 20010

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 25.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6827

Amount of Each Receipt this Period
 25.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
THOMAS GODARD

Mailing Address 330 ISLE OF CAPRI

City FT LAUDERDALE State FL Zip Code 33301

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

Name of Employer Occupation
 GODART FLORIDA REAL ESTATE DEVELOPMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6808

Amount of Each Receipt this Period
 125.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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 105 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
AMOS GOODMAN

Mailing Address **661 SPRINGS FIREPLACE RD**

City **EAST HAMPTON** State **NY** Zip Code **11937**

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

Name of Employer **WOLF DEN ASSOCIATES** Occupation **DEFENSE CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6769

Amount of Each Receipt this Period
125.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JOHN D GOODWIN

Mailing Address **1401 S JOYCE ST APT 813**

City **ARLINGTON** State **VA** Zip Code **22202**

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

Name of Employer **THE HERALD GROUP** Occupation **PUBLIC RELATIONS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6773

Amount of Each Receipt this Period
50.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CHARLES L GRIZZLE

Mailing Address **2326 CALIFORNIA ST NW**

City **WASHINGTON** State **DC** Zip Code **20008**

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

Name of Employer **THE GRIZZLE COMPANY** Occupation **LOBBYIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **125.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6786

Amount of Each Receipt this Period
125.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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 106 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JOHN P HALLIWELL

Mailing Address 925 H ST NW APT 703

City WASHINGTON State DC Zip Code 20001

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

Name of Employer PFIZER Occupation SENIOR DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6804

Amount of Each Receipt this Period
 _____ 125.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
WHITNEY A HEADLEE

Mailing Address 1526 17TH ST NW APT 110

City WASHINGTON State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 25.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6817

Amount of Each Receipt this Period
 _____ 25.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CHASE W HIENEMAN

Mailing Address 801 15TH ST S

City ARLINGTON State VA Zip Code 22202

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

Name of Employer REPUBLIC CONSULTING Occupation GOVERNMENT AFFAIRS CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6777

Amount of Each Receipt this Period
 _____ 100.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

_____ 0.00

**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 107 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
JAMES D JAMESON

Mailing Address 1650 CAMINO DEL MAR

City DEL MAR State CA Zip Code 92014

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

Name of Employer JAMES JAMESON LLC Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6852

Amount of Each Receipt this Period
 _____ 2600.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JAMES D JAMESON

Mailing Address 1650 CAMINO DEL MAR

City DEL MAR State CA Zip Code 92014

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

Name of Employer JAMES JAMESON LLC Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 3900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6853

Amount of Each Receipt this Period
 _____ 1300.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ROBERT J KABEL

Mailing Address 2230 CALIFORNIA ST. NW
4DW

City WASHINGTON State DC Zip Code 20008

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

Name of Employer FAEGRE BAKER DANIELS Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6740

Amount of Each Receipt this Period
 _____ 50.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

_____ 0.00

**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 108 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
STEVEN L KRESKSI

Mailing Address 128 12TH ST NE

City WASHINGTON State DC Zip Code 20002

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6744

Amount of Each Receipt this Period
50.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
BLAIR C LARKINS

Mailing Address 3101 N HAMPTON DR APT 1101

City ALEXANDRIA State VA Zip Code 22302

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

Name of Employer Occupation
BOCKORNY GROUP LEGISLATIVE AFFAIRS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6797

Amount of Each Receipt this Period
50.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER LAY

Mailing Address 1519 N BUCHANAN ST

City ARLINGTON State VA Zip Code 22205

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6748

Amount of Each Receipt this Period
250.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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 109 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER LAY

Mailing Address 1519 N BUCHANAN ST

City ARLINGTON State VA Zip Code 22205

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6836

Amount of Each Receipt this Period
50.00
 JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SETH LEVEY

Mailing Address 100 SAUNDERS POINT RD

City HUDDLESTON State VA Zip Code 24104

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6829

Amount of Each Receipt this Period
50.00
 JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MICHAEL LINTON

Mailing Address 1880 CARLIVLE DR

City SAN MARINO State CA Zip Code 91108

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

Name of Employer VULCAN Occupation REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6793

Amount of Each Receipt this Period
2500.00
 JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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 110 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
LOCKE LORD BISSELL & LIDDELL LLP PAC

Mailing Address 600 TRAVIS STREET
SUITE 2800

City HOUSTON State TX Zip Code 77002

FEC ID number of contributing federal political committee. **C** C00117861

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6855

Amount of Each Receipt this Period
500.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
KENNETH MARKSTEIN

Mailing Address PO BOX 354

City RANCHO SANTA FE State CA Zip Code 92067

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

Name of Employer Occupation
MARKSTEIN BEVERAGE MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6806

Amount of Each Receipt this Period
2500.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
TIM M MCGIVERN

Mailing Address 1335 R ST NW #2

City WASHINGTON State DC Zip Code 20009

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

Name of Employer Occupation
AT&T FEDERAL RELATIONS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6758

Amount of Each Receipt this Period
150.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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 111 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
KENNETH B MEHLMAN

Mailing Address **9 W 57TH ST STE 4200**

City **NEW YORK** State **NY** Zip Code **10019**

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

Name of Employer **KKR** Occupation **GLOBAL PUBLIC AFFAIRS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6741

Amount of Each Receipt this Period
1000.00
 JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
KELLY MIKULES

Mailing Address **7035 CORINTIA**

City **CARLSBAD** State **CA** Zip Code **92009**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6760

Amount of Each Receipt this Period
2600.00
 JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ANA V NAVARRO

Mailing Address **2907 COLUMBUS BLVD**

City **CORAL GABLES** State **FL** Zip Code **33134**

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

Name of Employer **SELF-EMPLOYED** Occupation **ENTREPRENEUR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6844

Amount of Each Receipt this Period
200.00
 JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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 112 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) COLIN O NEWMAN		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 1009 PRIORY PL		Transaction ID : SA12.6859	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Receipt this Period _____ 50.00 JFC TRANSFER-EQUALITY LEADERSHIP FUND
FEC ID number of contributing federal political committee. C		[]	
Name of Employer		Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 50.00	

Full Name (Last, First, Middle Initial) WALTER K OLSON		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 13 W MAIN ST		Transaction ID : SA12.6784	
City NEW MARKET	State MD	Zip Code 21774	Amount of Each Receipt this Period _____ 50.00 JFC TRANSFER-EQUALITY LEADERSHIP FUND
FEC ID number of contributing federal political committee. C		[]	
Name of Employer CATO INSTITUTE		Occupation SENIOR FELLOW	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 50.00	

Full Name (Last, First, Middle Initial) ALEX PELLE		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 18 LIEDTKE DR		Transaction ID : SA12.6788	
City CRANBURY	State NJ	Zip Code 08512	Amount of Each Receipt this Period _____ 25.00 JFC TRANSFER-EQUALITY LEADERSHIP FUND
FEC ID number of contributing federal political committee. C		[]	
Name of Employer STUDENT		Occupation STUDENT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 25.00	

SUBTOTAL of Receipts This Page (optional).....	_____ 0.00
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: (check only one)	PAGE 113 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GREGG T PITTS

Mailing Address 138 QUINCY PL NE #4

City WASHINGTON State DC Zip Code 20002

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

Name of Employer ZENGO CYCLE Occupation INSTRUCTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6800

Amount of Each Receipt this Period
50.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MIRIAM M PLANAS

Mailing Address 8937 SW 12TH ST

City MIAMI State FL Zip Code 33174

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

Name of Employer LCR MIAMI Occupation CO-CHAIR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
175.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6742

Amount of Each Receipt this Period
125.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ANNE L POLICASTRO

Mailing Address 9017 SYMMES RIDGE LN

City LOVELAND State OH Zip Code 45140

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6833

Amount of Each Receipt this Period
25.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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 114 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
TREVOR POTTER

Mailing Address **PO BOX 348**

City **THE PLAINS** State **VA** Zip Code **20198**

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

Name of Employer **CAPLIN AND DRYSDALE** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **125.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6754

Amount of Each Receipt this Period
125.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ANDREW POWALENY

Mailing Address **201 I ST SW #118**

City **WASHINGTON** State **DC** Zip Code **20024**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6838

Amount of Each Receipt this Period
25.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ASHTON RANDLE

Mailing Address **1725 11TH ST NW**

City **WASHINGTON** State **DC** Zip Code **20001**

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

Name of Employer **APA** Occupation **DIRECTOR, GOVT AFFAIRS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6809

Amount of Each Receipt this Period
125.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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 115 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
PATRICK SAMMON

Mailing Address 1916 17TH ST NW APT 5

City WASHINGTON State DC Zip Code 20009

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

Name of Employer SELF EMPLOYED Occupation FILM PRODUCER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6779

Amount of Each Receipt this Period
 _____ 125.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JORDAN M SCHWARTZ

Mailing Address 1916 9 ST NW UNIT 1

City WASHINGTON State DC Zip Code 20001

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

Name of Employer SKADDEN, ARPS Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6750

Amount of Each Receipt this Period
 _____ 125.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
RINA SHAH

Mailing Address 1025 FIRST ST SE #512

City WASHINGTON State DC Zip Code 20003

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

Name of Employer RILAX STRATEGIES, LLC Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.6752

Amount of Each Receipt this Period
 _____ 50.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

_____ 0.00

**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 116 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
AMBER K SMITH-BURTON

Mailing Address **3413 BURGUNDY RD**

City **ALEXANDRIA** State **VA** Zip Code **22303**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6840

Amount of Each Receipt this Period
50.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
GEORGINA I SOSA

Mailing Address **10531 SW 23RD TERRACE**

City **MIAMI** State **FL** Zip Code **33165**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6848

Amount of Each Receipt this Period
25.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JARED STOUT

Mailing Address **1533 PENNSYLVANIA AVE SE**

City **WASHINGTON** State **DC** Zip Code **20003**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6825

Amount of Each Receipt this Period
25.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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 117 OF 154
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DAVID M TREBING

Mailing Address 3900 CATHEDRAL AVENUE NW, #802-A

City WASHINGTON State DC Zip Code 20016

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

Name of Employer DAIMLER Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6782

Amount of Each Receipt this Period
500.00
 JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
BLAKE WEATHERFORD

Mailing Address 1200 14TH ST NW

City WASHINGTON State DC Zip Code 20005

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

Name of Employer HOUSE OF REPRESENTATIVES Occupation STAFFER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6795

Amount of Each Receipt this Period
25.00
 JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CHARLES F WU

Mailing Address 25 SEWALL ST

City WEST NEWTON State MA Zip Code 02465

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

Name of Employer BAYNORTH CAPITAL Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.6790

Amount of Each Receipt this Period
2600.00
 JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

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

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

0.00

**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)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CHARLES F WU

Mailing Address **25 SEWALL ST**

City **WEST NEWTON** State **MA** Zip Code **02465**

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

Name of Employer **BAYNORTH CAPITAL** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
03 / 31 / 2014

Transaction ID : SA12.6791

Amount of Each Receipt this Period
2600.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ANTHONY J ZAGOTTA

Mailing Address **1010 22ND ST NW**

City **WASHINGTON** State **DC** Zip Code **20037**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
125.00

Date of Receipt
03 / 31 / 2014

Transaction ID : SA12.6835

Amount of Each Receipt this Period
125.00

JFC TRANSFER-EQUALITY LEADERSHIP FUND

[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

Amount of Each Receipt this Period

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

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

0.00

19351.55

**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 119 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. AMERICAL CIVIC CENTER		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 467 MAIN ST.		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.4800
City WAKEFIELD	State MA	
Zip Code 01880	Purpose of Disbursement FACILITY RENTAL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 4255 AMON CARTER BLVD		Amount of Each Disbursement this Period 995.80 Transaction ID : SB17.4879
City FORT WORTH	State TX	
Zip Code 76155	Purpose of Disbursement CC PMT 1/24/14:TRAVEL: AIR	Category/ Type
Candidate Name	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:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 4255 AMON CARTER BLVD		Amount of Each Disbursement this Period 423.90 Transaction ID : SB17.4880
City FORT WORTH	State TX	
Zip Code 76155	Purpose of Disbursement CC PMT 1/24/14:TRAVEL: AIR	Category/ Type
Candidate Name	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:	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	400.00
TOTAL 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 120 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 4255 AMON CARTER BLVD		Amount of Each Disbursement this Period 178.90
City FORT WORTH	State TX Zip Code 76155	
Purpose of Disbursement CC PMT 1/24/14:TRAVEL: AIR		Transaction ID : SB17.4881
Candidate Name		
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)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 4255 AMON CARTER BLVD		Amount of Each Disbursement this Period 76.00
City FORT WORTH	State TX Zip Code 76155	
Purpose of Disbursement CC PMT 1/24/14:TRAVEL: AIR		Transaction ID : SB17.4882
Candidate Name		
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)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 200 VESEY STREET		Amount of Each Disbursement this Period 3731.86
City NEW YORK	State NY Zip Code 10285	
Purpose of Disbursement CREDIT CARD PAYMENT: CC PMT 1/24/14-SEE MEMO ENTRIES		Transaction ID : SB17.4877
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	3731.86
TOTAL 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 121 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 200 VESEY STREET		Amount of Each Disbursement this Period 35.00
City NEW YORK	State NY	
Zip Code 10285	Purpose of Disbursement CC PMT 1/24/14:BANK FEES	Transaction ID : SB17.4893
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 200 VESEY STREET		Amount of Each Disbursement this Period 96.38
City NEW YORK	State NY	
Zip Code 10285	Purpose of Disbursement CC PMT 1/24/14:BANK FEES	Transaction ID : SB17.4894
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 200 VESEY STREET		Amount of Each Disbursement this Period 1042.28
City NEW YORK	State NY	
Zip Code 10285	Purpose of Disbursement CREDIT CARD PAYMENT: CC PMT 2/24/14-SEE MEMO ENTRIES	Transaction ID : SB17.4902
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1042.28
TOTAL 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 122 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014	
Mailing Address 200 VESEY STREET			Amount of Each Disbursement this Period 911.11	
City NEW YORK	State NY	Zip Code 10285	Transaction ID : SB17.4907	
Purpose of Disbursement CC PMT 2/24/14:BANK FEES		Category/ Type	[MEMO ITEM]	
Candidate Name				
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. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014	
Mailing Address 200 VESEY STREET			Amount of Each Disbursement this Period 911.11	
City NEW YORK	State NY	Zip Code 10285	Transaction ID : SB17.4912	
Purpose of Disbursement CREDIT CARD PAYMENT: CC PMT 3/20/14-SEE MEMO ENTRIES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014	
Mailing Address 200 VESEY STREET			Amount of Each Disbursement this Period 35.00	
City NEW YORK	State NY	Zip Code 10285	Transaction ID : SB17.4915	
Purpose of Disbursement CC PMT 3/20/14:BANK FEES		Category/ Type	[MEMO ITEM]	
Candidate Name				
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:				

SUBTOTAL of Disbursements This Page (optional).....	911.11
TOTAL 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 123 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 200 VESEY STREET		Amount of Each Disbursement this Period 9,999,999.99 24.80
City NEW YORK	State NY	
Purpose of Disbursement CC PMT 3/20/14:BANK FEES		Transaction ID : SB17.4920
Candidate Name		
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)	[MEMO ITEM]
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS - MERCHANT SERVICES		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address WORLD FINANCIAL CENTER 200 VESEY ST.		Amount of Each Disbursement this Period 9,999,999.99 521.11
City NEW YORK	State NY	
Purpose of Disbursement MERCHANT FEES		Transaction ID : SB17.4801
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS - MERCHANT SERVICES		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address WORLD FINANCIAL CENTER 200 VESEY ST.		Amount of Each Disbursement this Period 9,999,999.99 439.35
City NEW YORK	State NY	
Purpose of Disbursement MERCHANT FEES		Transaction ID : SB17.4802
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....	960.46
TOTAL 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 124 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS - MERCHANT SERVICES			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014	
Mailing Address WORLD FINANCIAL CENTER 200 VESEY ST.			Amount of Each Disbursement this Period 18.16	
City NEW YORK	State NY	Zip Code 10285	Transaction ID : SB17.4803	
Purpose of Disbursement MERCHANT FEES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. AUTHORIZE.NET			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014	
Mailing Address PO BOX 8999			Amount of Each Disbursement this Period 35.15	
City SAN FRANCISCO	State CA	Zip Code 94128	Transaction ID : SB17.4809	
Purpose of Disbursement MERCHANT FEES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. OWEN BECKER			Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014	
Mailing Address 26 MAIN ST			Amount of Each Disbursement this Period 2250.00	
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB17.4819	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2303.31
TOTAL 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 125 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. OWEN BECKER		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 34.86 Transaction ID : SB17.4790
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement IN-KIND: OFFICE SUPPLIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. OWEN BECKER		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.4823
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. OWEN BECKER		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 84.98 Transaction ID : SB17.4791
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement IN-KIND: OFFICE SUPPLIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1619.84
TOTAL 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 126 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. OWEN BECKER		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.4829
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. OWEN BECKER		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 17.96 Transaction ID : SB17.4792
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement IN-KIND: OFFICE SUPPLIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. OWEN BECKER		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.4836
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3017.96
TOTAL 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 127 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. OWEN BECKER		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 24.81
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement IN-KIND: OFFICE SUPPLIES	Transaction ID : SB17.4793
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. OWEN BECKER		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 1500.00
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Transaction ID : SB17.4842
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. OWEN BECKER		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 97.64
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement IN-KIND: OFFICE SUPPLIES	Transaction ID : SB17.4794
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1622.45
TOTAL 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 128 OF 154			
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. BEST BUY

Mailing Address 7601 PENN AVE SOUTH

City RICHFIELD State MN Zip Code 55423

Purpose of Disbursement CC PMT 1/24/14:OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 24 / 2014

Amount of Each Disbursement this Period: 159.36

Transaction ID : SB17.4884

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. BLUE CROSS BLUE SHIELD

Mailing Address 401 PARK DR #14

City BOSTON State MA Zip Code 02215

Purpose of Disbursement PAYROLL BENEFITS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 15 / 2014

Amount of Each Disbursement this Period: 1482.88

Transaction ID : SB17.4812

Full Name (Last, First, Middle Initial)
C. BLUE CROSS BLUE SHIELD

Mailing Address 401 PARK DR #14

City BOSTON State MA Zip Code 02215

Purpose of Disbursement PAYROLL BENEFITS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 03 / 2014

Amount of Each Disbursement this Period: 741.44

Transaction ID : SB17.4813

SUBTOTAL of Disbursements This Page (optional) 2224.32

TOTAL 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 129 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. BOSTON LIMOUSINE INC		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address 51 HOWARD ST		Amount of Each Disbursement this Period 113.75
City SAUGUS	State MA Zip Code 01906	
Purpose of Disbursement CC PMT 2/24/14:TRAVEL: GROUND TRANSPORTATION		Transaction ID : SB17.4911
Candidate Name		
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)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. COMCAST		Date of Disbursement MM / DD / YYYY 03 / 28 / 2014
Mailing Address PO BOX 196		Amount of Each Disbursement this Period 469.94
City NEWARK	State NJ Zip Code 07101	
Purpose of Disbursement BROADBAND SERVICES		Transaction ID : SB17.4817
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. DINOS BRICK OVEN PIZZA		Date of Disbursement MM / DD / YYYY 01 / 24 / 2014
Mailing Address 389 LOWELL ST		Amount of Each Disbursement this Period 11.50
City WAKEFIELD	State MA Zip Code 01880	
Purpose of Disbursement CC PMT 1/24/14:TRAVEL: MEALS		Transaction ID : SB17.4886
Candidate Name		
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)	[MEMO ITEM]
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	469.94
TOTAL 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 130 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. DINOS BRICK OVEN PIZZA		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 389 LOWELL ST		Amount of Each Disbursement this Period 106.09
City WAKEFIELD	State MA	
Zip Code 01880	Purpose of Disbursement CC PMT 1/24/14:MEETING EXPENSE: MEALS	Transaction ID : SB17.4887
Candidate Name	Category/ Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. EPAY BUSINESS SOLUTIONS, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 27A MIDSTATE DRIVE STE 218		Amount of Each Disbursement this Period 972.16
City AUBURN	State MA	
Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES	Transaction ID : SB17.4818
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. EPAY BUSINESS SOLUTIONS, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 27A MIDSTATE DRIVE STE 218		Amount of Each Disbursement this Period 1100.40
City AUBURN	State MA	
Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES	Transaction ID : SB17.4822
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2072.56
TOTAL 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 131 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. EPAY BUSINESS SOLUTIONS, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 27A MIDSTATE DRIVE STE 218		Amount of Each Disbursement this Period 1821.46
City AUBURN State MA Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES Category/Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. EPAY BUSINESS SOLUTIONS, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 27A MIDSTATE DRIVE STE 218		Amount of Each Disbursement this Period 1809.46
City AUBURN State MA Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES Category/Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) C. EPAY BUSINESS SOLUTIONS, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 27A MIDSTATE DRIVE STE 218		Amount of Each Disbursement this Period 1194.81
City AUBURN State MA Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES Category/Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4825.73
TOTAL 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 132 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. EPAY BUSINESS SOLUTIONS, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 27A MIDSTATE DRIVE STE 218		Amount of Each Disbursement this Period 941.11 Transaction ID : SB17.4847
City AUBURN State MA Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FOUR POINTS SHERATON		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 1201 K ST NW		Amount of Each Disbursement this Period 515.25 Transaction ID : SB17.4889
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement CC PMT 1/24/14:TRAVEL: LODGING	
Candidate Name	Category/Type	
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) C. FOUR POINTS SHERATON		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 1201 K ST NW		Amount of Each Disbursement this Period 16.46 Transaction ID : SB17.4890
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement CC PMT 1/24/14:TRAVEL: MEALS	
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	941.11
TOTAL 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 133 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. GATEWAY REALTY TRUST		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 239 WESTERN AVE		Amount of Each Disbursement this Period 6900.00 Transaction ID : SB17.4853
City ESSEX State MA Zip Code 01929	Purpose of Disbursement RENT & UTILITIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. GATEWAY REALTY TRUST		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 239 WESTERN AVE		Amount of Each Disbursement this Period 2337.40 Transaction ID : SB17.4854
City ESSEX State MA Zip Code 01929	Purpose of Disbursement RENT & UTILITIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. RYAN GOUGH		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4820
City LYNNFIELD State MA Zip Code 01940	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11737.40
TOTAL 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 134 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. RYAN GOUGH		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4824
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. RYAN GOUGH		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4830
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. RYAN GOUGH		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 359.70 Transaction ID : SB17.4796
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement IN-KIND: OFFICE SUPPLIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5359.70
TOTAL 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 135 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. RYAN GOUGH		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4837
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. RYAN GOUGH		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.4843
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. RYAN GOUGH		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.4848
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8500.00
TOTAL 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 136 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. GRIDIRON COMMUNICATIONS		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address PO BOX 1308		Amount of Each Disbursement this Period 5750.71
City GRANGER	State IN Zip Code 46530	
Purpose of Disbursement DIRECT MAIL PRINTING & POSTAGE		Transaction ID : SB17.4855
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B. HANNAFORD		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 357 BROADWAY		Amount of Each Disbursement this Period 70.25
City SAUGUS	State MA Zip Code 01906	
Purpose of Disbursement CC PMT 3/20/14:OFFICE SUPPLIES		Transaction ID : SB17.4914
Candidate Name		
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)	Category/ Type
State: District:		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. IMG E LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 603 KING STREET 4TH FLOOR		Amount of Each Disbursement this Period 7000.00
City ALEXANDRIA	State VA Zip Code 22314	
Purpose of Disbursement WEBSITE DEVELOPMENT		Transaction ID : SB17.4857
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12750.71
TOTAL 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 137 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. INTERCONTINENTAL MIAMI		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 100 CHOPIN PLAZA		Amount of Each Disbursement this Period 292.67
City MIAMI	State FL Zip Code 33131	
Purpose of Disbursement CC PMT 1/24/14:TRAVEL: LODGING		Transaction ID : SB17.4892
Candidate Name		
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)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. ASHLEY KORB		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 3500.00
City LYNNFIELD	State MA Zip Code 01940	
Purpose of Disbursement PAYROLL		Transaction ID : SB17.4821
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) C. ASHLEY KORB		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 3500.00
City LYNNFIELD	State MA Zip Code 01940	
Purpose of Disbursement PAYROLL		Transaction ID : SB17.4825
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7000.00
TOTAL 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 138 OF 154			
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. ASHLEY KORB		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.4831
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ASHLEY KORB		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 95.61 Transaction ID : SB17.4795
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement IN-KIND: OFFICE SUPPLIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ASHLEY KORB		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.4838
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7095.61
TOTAL 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 139 OF 154			
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. ASHLEY KORB		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.4844
City LYNNFIELD	State MA	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ASHLEY KORB		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.4849
City LYNNFIELD	State MA	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. KOWLOON RESTAURANT		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 948 BROADWAY		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4859
City SAUGUS	State MA	
Purpose of Disbursement FACILITY RENTAL/CATERING SERVICES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7500.00
TOTAL 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 140 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. LAZ PARKING		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 15 LEWIS ST		Amount of Each Disbursement this Period 16.00
City HARTFORD	State CT	
Zip Code 06103		Transaction ID : SB17.4917
Purpose of Disbursement CC PMT 3/20/14:TRAVEL: GROUND TRANSPORTATION		
Candidate Name		[MEMO ITEM]
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. MAWCARB		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address WELSH & PARKER INSURANCE AGENCY 57 PUTNAM STREET		Amount of Each Disbursement this Period 780.00
City WINTHROP	State MA	
Zip Code 02152		Transaction ID : SB17.4861
Purpose of Disbursement INSURANCE		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. MERCHANT WAREHOUSE		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address PO BOX 6600		Amount of Each Disbursement this Period 635.48
City HAGERSTOWN	State MD	
Zip Code 21740		Transaction ID : SB17.4862
Purpose of Disbursement MERCHANT FEES		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	1415.48
TOTAL 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 141 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. MERCHANT WAREHOUSE		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address PO BOX 6600		Amount of Each Disbursement this Period 272.00
City HAGERSTOWN	State MD	
Zip Code 21740	Purpose of Disbursement MERCHANT FEES	Transaction ID : SB17.4863
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MERCHANT WAREHOUSE		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address PO BOX 6600		Amount of Each Disbursement this Period 604.81
City HAGERSTOWN	State MD	
Zip Code 21740	Purpose of Disbursement MERCHANT FEES	Transaction ID : SB17.4864
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CHELSEY NEUHAUS		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 1750.00
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Transaction ID : SB17.4833
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2626.81
TOTAL 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 142 OF 154			
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. CHELSEY NEUHAUS		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 1750.00 Transaction ID : SB17.4839
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CHELSEY NEUHAUS		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 1750.00 Transaction ID : SB17.4845
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CHELSEY NEUHAUS		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 1750.00 Transaction ID : SB17.4850
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5250.00
TOTAL 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 143 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. NORTH ANDOVER YOUTH CENTER		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 33 JOHNSON ST		Amount of Each Disbursement this Period 2400.00
City NORTH ANDOVER	State MA Zip Code 01845	
Purpose of Disbursement CC PMT 3/20/14:CHARITABLE DONATION		Transaction ID : SB17.4919
Candidate Name		
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)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. PRODUCTIONS INC		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 137 GLENN ST		Amount of Each Disbursement this Period 346.38
City LAWRENCE	State MA Zip Code 01843	
Purpose of Disbursement CC PMT 2/24/14:AUDIO VISUAL CONSULTING		Transaction ID : SB17.4909
Candidate Name		
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)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 138 CONANT STREET		Amount of Each Disbursement this Period 2400.00
City BEVERLY	State MA Zip Code 01915	
Purpose of Disbursement COMPLIANCE CONSULTING		Transaction ID : SB17.4867
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	2400.00
TOTAL 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 144 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 138 CONANT STREET		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17.4868
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 138 CONANT STREET		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17.4869
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ELEANOR ROLLINGS		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 811 NORTH CAROLINA AVE SE		Amount of Each Disbursement this Period 6500.00 Transaction ID : SB17.4798
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement FUNDRAISING CONSULTING	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11300.00
TOTAL 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 145 OF 154			
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 444 BROADWAY		Amount of Each Disbursement this Period 43.55
City SAUGUS	State MA Zip Code 01906	
Purpose of Disbursement CC PMT 2/24/14:OFFICE SUPPLIES		Transaction ID : SB17.4906
Candidate Name		
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)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 444 BROADWAY		Amount of Each Disbursement this Period 79.06
City SAUGUS	State MA Zip Code 01906	
Purpose of Disbursement CC PMT 3/20/14:OFFICE SUPPLIES		Transaction ID : SB17.4921
Candidate Name		
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)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. SWIFTCURRENT STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 186 CABOT STREET		Amount of Each Disbursement this Period 400.00
City BEVERLY	State MA Zip Code 01915	
Purpose of Disbursement DIGITAL CONSULTING		Transaction ID : SB17.4871
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	400.00
TOTAL 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 146 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

A. SWIFTCURRENT STRATEGIES

Full Name (Last, First, Middle Initial)
Mailing Address 186 CABOT STREET

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 02 / 14 / 2014

Amount of Each Disbursement this Period: 400.00

Transaction ID : SB17.4872

B. CHARLES SZOLD

Full Name (Last, First, Middle Initial)
Mailing Address 26 MAIN ST

City LYNNFIELD State MA Zip Code 01940

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 01 / 31 / 2014

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.4827

C. CHARLES SZOLD

Full Name (Last, First, Middle Initial)
Mailing Address 26 MAIN ST

City LYNNFIELD State MA Zip Code 01940

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 02 / 14 / 2014

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.4834

SUBTOTAL of Disbursements This Page (optional) 4400.00

TOTAL 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 147 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. CHARLES SZOLD		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4840
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. CHARLES SZOLD		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4846
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. CHARLES SZOLD		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4851
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional).....	6000.00
TOTAL 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 148 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. THE CATALYST GROUP RW, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 600 PENNSYLVANIA AVE SE SUITE 330		Amount of Each Disbursement this Period 4560.00
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement FUNDRAISING CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.4874
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. THE HOME DEPOT		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 564 BROADWAY		Amount of Each Disbursement this Period 18.48
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement CC PMT 2/24/14:OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.4904 [MEMO ITEM]
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) C. THE HOME DEPOT		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 564 BROADWAY		Amount of Each Disbursement this Period 22.08
City SAUGUS State MA Zip Code 01906	Purpose of Disbursement CC PMT 2/24/14:OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.4905 [MEMO ITEM]
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:	

SUBTOTAL of Disbursements This Page (optional).....	4560.00
TOTAL 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 149 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. THE NEW YORKER HOTEL			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014	
Mailing Address 481 8TH AVE			Amount of Each Disbursement this Period 305.52	
City NEW YORK	State NY	Zip Code 10001	Transaction ID : SB17.4896	
Purpose of Disbursement CC PMT 1/24/14:TRAVEL: LODGING		Category/ Type	[MEMO ITEM]	
Candidate Name				
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. THRIFTCO PRINTING			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address 26 HOWLEY STREET			Amount of Each Disbursement this Period 430.31	
City PEABODY	State MA	Zip Code 01960	Transaction ID : SB17.4876	
Purpose of Disbursement PRINTING AND DESIGN SERVICES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. TLF WINSTON FLOWERS			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014	
Mailing Address 131 NEWBURY ST			Amount of Each Disbursement this Period 280.13	
City BOSTON	State MA	Zip Code 02116	Transaction ID : SB17.4898	
Purpose of Disbursement CC PMT 1/24/14:FLORAL EXPENSE		Category/ Type	[MEMO ITEM]	
Candidate Name				
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:				

SUBTOTAL of Disbursements This Page (optional).....	430.31
TOTAL 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 150 OF 154	
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 25.00
City PHOENIX State AZ Zip Code 85034	Purpose of Disbursement CC PMT 1/24/14:TRAVEL: AIR	
Candidate Name	Category/Type	Transaction ID : SB17.4900 [MEMO ITEM]
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. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 213.90
City PHOENIX State AZ Zip Code 85034	Purpose of Disbursement CC PMT 1/24/14:TRAVEL: AIR	
Candidate Name	Category/Type	Transaction ID : SB17.4901 [MEMO ITEM]
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) C. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 428.00
City PHOENIX State AZ Zip Code 85034	Purpose of Disbursement CC PMT 2/24/14:TRAVEL: AIR	
Candidate Name	Category/Type	Transaction ID : SB17.4903 [MEMO ITEM]
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:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL 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 151 OF 154			
	<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)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. US AIRWAYS			Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 4000 E SKY HARBOR BLVD			Amount of Each Disbursement this Period 118.00
City PHOENIX	State AZ	Zip Code 85034	
Purpose of Disbursement CC PMT 3/20/14:TRAVEL: AIR		Category/ Type	Transaction ID : SB17.4922 [MEMO ITEM]
Candidate Name			
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. US AIRWAYS			Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 4000 E SKY HARBOR BLVD			Amount of Each Disbursement this Period 268.00
City PHOENIX	State AZ	Zip Code 85034	
Purpose of Disbursement CC PMT 3/20/14:TRAVEL: AIR		Category/ Type	Transaction ID : SB17.4923 [MEMO ITEM]
Candidate Name			
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) C. US AIRWAYS			Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 4000 E SKY HARBOR BLVD			Amount of Each Disbursement this Period 200.00
City PHOENIX	State AZ	Zip Code 85034	
Purpose of Disbursement CC PMT 3/20/14:TRAVEL: AIR		Category/ Type	Transaction ID : SB17.4924 [MEMO ITEM]
Candidate Name			
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: _____		

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	124868.95

**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 152 OF 154			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. OWEN BECKER			Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014	
Mailing Address 26 MAIN ST			Amount of Each Disbursement this Period 34.86	
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB20A.4783	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. OWEN BECKER			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address 26 MAIN ST			Amount of Each Disbursement this Period 84.98	
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB20A.4784	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. OWEN BECKER			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014	
Mailing Address 26 MAIN ST			Amount of Each Disbursement this Period 17.96	
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB20A.4785	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	137.80
TOTAL 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 153 OF 154			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. OWEN BECKER		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 482.15 Transaction ID : SB20A.4786
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. OWEN BECKER		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 97.64 Transaction ID : SB20A.4787
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. RYAN GOUGH		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 26 MAIN ST		Amount of Each Disbursement this Period 359.70 Transaction ID : SB20A.4789
City LYNNFIELD	State MA	
Zip Code 01940	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	482.15
TOTAL 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 154 OF 154			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
TISEI CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. ASHLEY KORB			Date of Disbursement MM / DD / YYYY 02 / 28 / 2014		
Mailing Address 26 MAIN ST			Amount of Each Disbursement this Period 95.61		
City LYNNFIELD	State MA	Zip Code 01940	Transaction ID : SB20A.4788		
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

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

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

SUBTOTAL of Disbursements This Page (optional).....	95.61
TOTAL This Period (last page this line number only).....	715.56