

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

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

12FE4M5

Tom Reed for Congress

ADDRESS (number and street)

PO Box 10847

Check if different than previously reported. (ACC)

Rochester

NY

14610-0847

2. FEC IDENTIFICATION NUMBER

C C00464032

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

NY

23

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on 11 / 04 / 2014 in the State of NY

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

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

Election on / / in the State of

5. Covering Period

04 / 01 / 2014 through 06 / 04 / 2014

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

Type or Print Name of Treasurer Marc Valerio

Signature of Treasurer Marc Valerio

[Electronically Filed]

Date

06 / 12 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Table with 8 columns and 1 row for Office Use Only.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Tom Reed for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	321781.06	2171684.14
(b) Total Contribution Refunds (from Line 20(d))	1000	3925
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	320781.06	2167759.14
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	234485.95	1256183.42
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	1357.64
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	234485.95	1254825.78
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1161754.8	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

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

Tom Reed for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 04 / 2014

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).....	141880.06	842960.99
(ii) Unitemized.....	7526	91094.14
(iii) TOTAL of contributions from individuals ▶	149406.06	934055.13
(b) Political Party Committees.....	1375	7350
(c) Other Political Committees (such as PACs).....	171000	1230279.01
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	321781.06	2171684.14
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	60278.52
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	1357.64
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0	8
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	321781.06	2233328.3

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	234485.95	1256183.42
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1000	3925
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000	3925
21. OTHER DISBURSEMENTS	0	2700
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	235485.95	1262808.42

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1075459.69
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	321781.06
25. SUBTOTAL (add Line 23 and Line 24).....	1397240.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	235485.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1161754.8

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Harter Secret & Emery LLP

Mailing Address 1600 Bausch And Lomb Place

City Rochester State NY Zip Code 14604-2711

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**

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

Transaction ID : A-CF11737

Amount of Each Receipt this Period
 250

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

B. Full Name (Last, First, Middle Initial)
Daniel Kinel

Mailing Address 471 Claybourne Road

City Rochester State NY Zip Code 14618-1201

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

Name of Employer Occupation
 Harter Secret Emery Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2250**

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

Transaction ID : A-PIP1682

Amount of Each Receipt this Period
 250

[MEMO ITEM]
 Partnership Itemization Memo

C. Full Name (Last, First, Middle Initial)
Hiscock & Barclay LLP

Mailing Address 100 Chestnut Street
 Suite 2000

City Rochester State NY Zip Code 14604-2404

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF11689

Amount of Each Receipt this Period
 500

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

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 6 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Hunton & Williams

Mailing Address 2200 Pennsylvania Avenue NW

City Washington State DC Zip Code 20037-1701

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11898

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
REXH20

Mailing Address 141 Sullys Trail Suite 2

City Pittsford State NY Zip Code 14534-4563

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : A-CF11611

Amount of Each Receipt this Period
350

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

C. Full Name (Last, First, Middle Initial)
E. David Kailbourne

Mailing Address 151 Sullys Trail Suite 2

City Pittsford State NY Zip Code 14534-4562

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

Name of Employer Occupation
 REXH20 CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : A-PIP1683

Amount of Each Receipt this Period
350

[MEMO ITEM]
 Partnership Itemization Memo

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 7 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
S & S Realty of Rochester

Mailing Address 900 John Street

City West Henrietta State NY Zip Code 14586-9748

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 15 / 2014

Transaction ID : A-CF11304

Amount of Each Receipt this Period
500

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

B. Full Name (Last, First, Middle Initial)
Mr. Bernard H Schroeder

Mailing Address 38 Scarborough Park

City Rochester State NY Zip Code 14625-1365

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

Name of Employer Occupation
 Lake Beverage Corp. President/GM

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 15 / 2014

Transaction ID : A-PIP1684

Amount of Each Receipt this Period
500

[MEMO ITEM]
 Partnership Itemization Memo

C. Full Name (Last, First, Middle Initial)
Seneca Nation Of Indians

Mailing Address PO Box 231

City Salamanca State NY Zip Code 14779-0231

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**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 22 / 2014

Transaction ID : A-CF11619

Amount of Each Receipt this Period
2600

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 8 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Woods Oviatt-Gilman

Mailing Address 2 State Street

City Rochester State NY Zip Code 14614

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : A-CF11544

Amount of Each Receipt this Period
 500

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

B. Full Name (Last, First, Middle Initial)
Anthony Cotroneo

Mailing Address 2 State Street

City Rochester State NY Zip Code 14614

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

Name of Employer Occupation
 Woods Oviatt-Gilman Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : A-PIP1625

Amount of Each Receipt this Period
 500

[MEMO ITEM]
 Partnership Itemization Memo

C. Full Name (Last, First, Middle Initial)
Mr. Philip C Ackerman

Mailing Address 20 S Meadow Drive

City Orchard Park State NY Zip Code 14127-2723

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

Name of Employer Occupation
 Self Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : A-CF11439

Amount of Each Receipt this Period
 500

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 9 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Clayton A. Ambrose

Mailing Address 931 Oak Hill Drive

City Elmira State NY Zip Code 14905-1435

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

Name of Employer Realty USA Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : A-CF11664

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Ms. Carol H. Anderson

Mailing Address 1025 Strong Road

City Victor State NY Zip Code 14564-9124

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2475**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11642

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Dr. Richard F. Andolina DDS

Mailing Address 74 Main Street

City Hornell State NY Zip Code 14843-1520

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 **1500**

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

Transaction ID : A-CF11530

Amount of Each Receipt this Period
500

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 166
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) Arthur Ambrecht		Date of Receipt MM / DD / YYYY 05 / 02 / 2014
Mailing Address 4629 Sunset Bay Drive		Transaction ID : A-CF11453
City Bemus Point	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35
Name of Employer Self	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 245	

Full Name (Last, First, Middle Initial) Louis M Bacon		Date of Receipt MM / DD / YYYY 06 / 04 / 2014
Mailing Address 1251 Avenue Of The Americas Floor 17		Transaction ID : A-CF11807
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Moore Capital Management	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

Full Name (Last, First, Middle Initial) Louis M Bacon		Date of Receipt MM / DD / YYYY 06 / 04 / 2014
Mailing Address 1251 Avenue Of The Americas Floor 17		Transaction ID : A-CF11808
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Moore Capital Management	Occupation CEO	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

SUBTOTAL of Receipts This Page (optional).....	5235.00
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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Bruce Baker

Mailing Address 500 Allens Creek Road

City Rochester State NY Zip Code 14618-3406

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

Name of Employer Nixon Peabody Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11691

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. John E. Benjamin

Mailing Address 735 Ridge Road

City Horseheads State NY Zip Code 14845-9376

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

Name of Employer 3 Rivers Development Corp Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1350**

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

Transaction ID : A-CF11531

Amount of Each Receipt this Period
350

C. Full Name (Last, First, Middle Initial)
Mr. John E. Benjamin

Mailing Address 735 Ridge Road

City Horseheads State NY Zip Code 14845-9376

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

Name of Employer 3 Rivers Development Corp Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1350**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11649

Amount of Each Receipt this Period
250

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

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

850.00

**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 12 OF 166
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) Arthur L Berkey		Date of Receipt M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 1205 Ellis Hollow Road		Transaction ID : A-CF11368
City Ithaca	State NY	Zip Code 14850-2920
FEC ID number of contributing federal political committee.	C	
Name of Employer Self	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 322	
		Amount of Each Receipt this Period 25

Full Name (Last, First, Middle Initial) Arthur L Berkey		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 1205 Ellis Hollow Road		Transaction ID : A-CF11757
City Ithaca	State NY	Zip Code 14850-2920
FEC ID number of contributing federal political committee.	C	
Name of Employer Self	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 322	
		Amount of Each Receipt this Period 99

Full Name (Last, First, Middle Initial) Mr. Randall K. Best		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 103 Sunset Boulevard		Transaction ID : A-CF11437
City Angola	State NY	Zip Code 14006-1038
FEC ID number of contributing federal political committee.	C	
Name of Employer Gernatt Asphalt	Occupation VP	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000	
		Amount of Each Receipt this Period 1000

SUBTOTAL of Receipts This Page (optional).....	1124.00
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 13 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Martin K. Birmingham, Jr.

Mailing Address 14 Northstone Rise

City State Zip Code
Pittsford NY 14534-3064

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

Name of Employer Occupation
Five Star Bank President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : A-CF11579

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. Eugene H. Blabey II

Mailing Address PO Box 92

City State Zip Code
Forestburgh NY 12777-0092

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

Name of Employer Occupation
Livonia, Avon & Lakeville RR President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2900

Date of Receipt
 M M / D D / Y Y Y Y
05 / 28 / 2014

Transaction ID : A-CF11657

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Mr. Eugene H. Blabey II

Mailing Address PO Box 92

City State Zip Code
Forestburgh NY 12777-0092

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

Name of Employer Occupation
Livonia, Avon & Lakeville RR President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2900

Date of Receipt
 M M / D D / Y Y Y Y
05 / 28 / 2014

Transaction ID : A-CF11658

Amount of Each Receipt this Period
300

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 14 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Dr. David L Black Ph.D.

Mailing Address 819 Plantation Boulevard

City State Zip Code
Gallatin TN 37066-4497

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

Name of Employer Occupation
Aegis Sciences Corporation President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : A-CF11239

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Mr. Andrew M Blum

Mailing Address 320 E 57th Street
Apt. 4B

City State Zip Code
New York NY 10022-2485

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

Name of Employer Occupation
C.L. King and Associates Managing Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700

Date of Receipt
 M M / D D / Y Y Y Y
05 / 16 / 2014

Transaction ID : A-CF11636

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
George H Bodine

Mailing Address 60 W 57th Street
Apt. 6J

City State Zip Code
New York NY 10019-3953

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

Name of Employer Occupation
Self Financial Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2005

Date of Receipt
 M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : A-CF11255

Amount of Each Receipt this Period
500

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

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

3200.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Thomas F Bonadio

Mailing Address 1 Country Club Drive

City Rochester State NY Zip Code 14618-3719

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

Name of Employer Bonadio & Co. LLP Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1520.99

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF11803

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Charles A Bosman

Mailing Address PO Box 321

City Interlaken State NY Zip Code 14847-0321

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

Name of Employer Boxman Enterprises Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
270

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : A-CF11410

Amount of Each Receipt this Period
35

C. Full Name (Last, First, Middle Initial)
Peter Bottorff

Mailing Address 2109 N Triphammer Road

City Ithaca State NY Zip Code 14850-1536

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : A-CF11366

Amount of Each Receipt this Period
25

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

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

560.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Daniel C. Bower

Mailing Address 100 Hunt Center

City Horseheads State NY Zip Code 14845-1019

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

Name of Employer Hunt Engineers Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 12 / 2014

Transaction ID : A-CF11568

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Patrick C. Burke

Mailing Address 80 Linden Oaks Suite 210

City Rochester State NY Zip Code 14625-2809

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

Name of Employer Burke Group Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11679

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Craig D Cairns

Mailing Address 574 Allens Creek Road

City Rochester State NY Zip Code 14618-3406

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

Name of Employer Howe & Rusling Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11684

Amount of Each Receipt this Period
500

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: (check only one)	PAGE 17 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Harlan Calkins

Mailing Address 105 Country Club Drive

City Rochester State NY Zip Code 14618-3721

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

Name of Employer Rochester Midland Corp Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11681

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Peter Call

Mailing Address 7885 Lewiston Road

City Batavia State NY Zip Code 14020-1266

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

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11740

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Louis C Camilleri

Mailing Address 120 Park Avenue

City New York State NY Zip Code 10017-5577

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

Name of Employer Philip Morris International Occupation Chairman of the Board

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : A-CF11599

Amount of Each Receipt this Period
1000

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

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

2500.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Barbara R Cantrill

Mailing Address 359 Glen Avenue

City Elmira State NY Zip Code 14905-1243

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

Name of Employer Self Occupation Retire

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11285

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Barbara R Cantrill

Mailing Address 359 Glen Avenue

City Elmira State NY Zip Code 14905-1243

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

Name of Employer Self Occupation Retire

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

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

Transaction ID : A-CF11732

Amount of Each Receipt this Period
75

C. Full Name (Last, First, Middle Initial)
Frank M Cassara

Mailing Address 58 Queensland Drive

City Spencerport State NY Zip Code 14559-2066

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

Name of Employer Shapiro, DiCaro & Barak Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11742

Amount of Each Receipt this Period
750

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

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

875.00

**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 19 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Gregory J Chambery

Mailing Address 100 Daniel Drive

City Webster State NY Zip Code 14580-2912

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

Name of Employer Maplewood Nursing Home Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11802

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Adam M Cohen

Mailing Address 145 W 67th Street
Apt. 34G

City New York State NY Zip Code 10023-5940

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

Name of Employer Self Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2050**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 23 / 2014

Transaction ID : A-CF11625

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
James P. Coleman Esq.

Mailing Address PO Box 271

City Watkins Glen State NY Zip Code 14891-0271

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1050**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11651

Amount of Each Receipt this Period
250

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

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

1300.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr Frederick W Conroy

Mailing Address 2701 Remington Road

City State Zip Code
Oakton VA 22124-1724

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

Name of Employer Occupation
Dresser Rand Senior Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700

Date of Receipt
 M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : A-CF11563

Amount of Each Receipt this Period
200

B. Full Name (Last, First, Middle Initial)
Todd Cook

Mailing Address 142 Chamberlain Road

City State Zip Code
Honeoye Falls NY 14472-9728

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

Name of Employer Occupation
Connection Technology Center Exec

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3100

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

Transaction ID : A-CF11526

Amount of Each Receipt this Period
2100

C. Full Name (Last, First, Middle Initial)
Todd Cook

Mailing Address 142 Chamberlain Road

City State Zip Code
Honeoye Falls NY 14472-9728

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

Name of Employer Occupation
Connection Technology Center Exec

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3100

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

Transaction ID : A-CF11527

Amount of Each Receipt this Period
500

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

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

2800.00

**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 21 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Anthony I Crossed

Mailing Address 7 Loch Loyal Court

City Penfield State NY Zip Code 14526-9568

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

Name of Employer Conifer Realty Occupation Exc VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF11688

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Richard J. Crossed

Mailing Address 1675 Clover Street

City Rochester State NY Zip Code 14618-2517

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

Name of Employer Conifer Realty Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF11690

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mrs. Cheryl Crozier

Mailing Address 2868 Chequers Circle

City Big Flats State NY Zip Code 14814-9610

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

Name of Employer Corning, Inc. Occupation Govt. Affairs Coordinator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **205**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : A-CF11376

Amount of Each Receipt this Period
50

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
C. Tait Cruse

Mailing Address 5420 L B J Freeway
Suite 1300

City Dallas State TX Zip Code 75240-6299

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

Name of Employer Northwestern Mutual-Dallas Occupation Managing Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF11782

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Norman L Davidson

Mailing Address 1812 Ridge Road

City Lansing State NY Zip Code 14882-8822

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

Name of Employer Davisdon Jr, Norman Lindlsey Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : A-CF11323

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Anthony J DiBarnaba

Mailing Address 5 Copper Woods

City Pittsford State NY Zip Code 14534-2959

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

Name of Employer Benefit Resource Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF11685

Amount of Each Receipt this Period
500

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

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

1600.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
David R DiCaro

Mailing Address 125 Fisher Road

City Rochester State NY Zip Code 14624-3430

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

Name of Employer Town of Gates Occupation Police Chief

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF11743

Amount of Each Receipt this Period
 500

B. Full Name (Last, First, Middle Initial)
Mr. John A DiCaro

Mailing Address 6 Tibbles Lane

City Rochester State NY Zip Code 14624-2224

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

Name of Employer Shapiro & Dicaro Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF11744

Amount of Each Receipt this Period
 500

C. Full Name (Last, First, Middle Initial)
Elyse A Dilaura

Mailing Address 32 Chadwick Manor

City Fairport State NY Zip Code 14450-8820

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

Name of Employer Self Occupation 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
 05 / 05 / 2014

Transaction ID : A-CF11529

Amount of Each Receipt this Period
 250

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 24 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Robert O Dingman Jr.

Mailing Address 23 Saint John Street

City State Zip Code
Gowanda NY 14070-1122

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

Name of Employer Occupation
NY & Lake Erie RR CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
385

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

Transaction ID : A-CF11447

Amount of Each Receipt this Period
35

B. Full Name (Last, First, Middle Initial)
Dennis A Ditch

Mailing Address 2938 County Road 40

City State Zip Code
Bloomfield NY 14469-9371

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

Name of Employer Occupation
Self Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 21 / 2014

Transaction ID : A-CF11637

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
William Dodd

Mailing Address 1 Landmark Square
Floor 8

City State Zip Code
Stamford CT 06901-2670

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

Name of Employer Occupation
Dodd Consulting Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
04 / 16 / 2014

Transaction ID : A-CF11253

Amount of Each Receipt this Period
1000

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

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

1085.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Michael W. Donnelly

Mailing Address 3017 Goff Road

City Corning State NY Zip Code 14830-9707

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

Name of Employer Corning Inc. Occupation VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

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

Transaction ID : A-CF11525

Amount of Each Receipt this Period
 500

B. Full Name (Last, First, Middle Initial)
John Doran

Mailing Address 15321 Masonwood Drive

City Darnestown State MD Zip Code 20878-3611

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

Name of Employer Hiring Incentives, Inc. Occupation employment tax credits

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2014

Transaction ID : A-CF11595

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
Katherine P Douglas

Mailing Address 10268 Beaver Pond Lane

City Corning State NY Zip Code 14830-9612

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

Name of Employer Corning Community College Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **555**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2014

Transaction ID : A-CF11381

Amount of Each Receipt this Period
 25

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

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

1525.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
John G Doyle Jr.

Mailing Address 2463 Lake Road

City Ontario State NY Zip Code 14519-9712

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

Name of Employer Doyle Security Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11699

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Charles M Edmondson

Mailing Address 1 Saxon Drive

City Alfred State NY Zip Code 14802-1205

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

Name of Employer Alfred University Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : A-CF11556

Amount of Each Receipt this Period
350

C. Full Name (Last, First, Middle Initial)
Mr. William C. Elkins

Mailing Address 4335 State Route 414

City Burdett State NY Zip Code 14818-9670

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **305**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 15 / 2014

Transaction ID : A-CF11291

Amount of Each Receipt this Period
50

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 27 OF 166
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. William C. Elkins

Mailing Address 4335 State Route 414

City State Zip Code
Burdett NY 14818-9670

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

Name of Employer Occupation
Self Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
305

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11763

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Dennis Fagan

Mailing Address PO Box 335

City State Zip Code
Tyrone NY 14887-0335

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

Name of Employer Occupation
Schuyler County Legislature Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11650

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
James P. Finkle

Mailing Address 207 High Point Drive
Bldg. 100

City State Zip Code
Victor NY 14564-1061

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

Name of Employer Occupation
Constellation Brands Senior VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11677

Amount of Each Receipt this Period
900

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

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

1200.00

**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 28 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
James P. Finkle

Mailing Address 207 High Point Drive
Bldg. 100

City Victor State NY Zip Code 14564-1061

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

Name of Employer Constellation Brands Occupation Senior VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF11678

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
Peter Finlay

Mailing Address 37 Sayles Street

City Alfred State NY Zip Code 14802-1326

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF11756

Amount of Each Receipt this Period
 150

C. Full Name (Last, First, Middle Initial)
Mr. Patrick H. Flynn

Mailing Address 2621 Flynn Road

City Penn Yan State NY Zip Code 14527-9789

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

Name of Employer Flynn Farms Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : A-CF11589

Amount of Each Receipt this Period
 125

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

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

375.00

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

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

FOR LINE NUMBER: PAGE 29 OF 166
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Richard E. Forrestel Sr.

Mailing Address **PO Box 358**

City **Akron** State **NY** Zip Code **14001-0358**

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

Name of Employer **Cold Springs Construction** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1450**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF11356

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Richard E. Forrestel Sr.

Mailing Address **PO Box 358**

City **Akron** State **NY** Zip Code **14001-0358**

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

Name of Employer **Cold Springs Construction** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1450**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : A-CF11289

Amount of Each Receipt this Period
350

C. Full Name (Last, First, Middle Initial)
Gordon E. Forth

Mailing Address **35 Wexford Glen**

City **Pittsford** State **NY** Zip Code **14534-4204**

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

Name of Employer **Woods Oviatt Gilman LLP** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11686

Amount of Each Receipt this Period
500

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

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

950.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Timothy D Fournier

Mailing Address 183 E Main Street
Suite 600

City Rochester State NY Zip Code 14604-1617

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

Name of Employer Conifer Realty LLC Occupation President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : A-CF11546

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Brian Z France

Mailing Address PO Box 2875

City Daytona Beach State FL Zip Code 32120-2875

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

Name of Employer NASCAR Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4600**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF11696

Amount of Each Receipt this Period
2000

C. Full Name (Last, First, Middle Initial)
Brian Z France

Mailing Address PO Box 2875

City Daytona Beach State FL Zip Code 32120-2875

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

Name of Employer NASCAR Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4600**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF11697

Amount of Each Receipt this Period
600

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 31 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. James C. France

Mailing Address **PO Box 2875**

City **Daytona Beach** State **FL** Zip Code **32120-2875**

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

Name of Employer **NASCAR** Occupation **Administrator**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11645

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Sharon M France

Mailing Address **1147 N Halifax Avenue**

City **Daytona Beach** State **FL** Zip Code **32118-3654**

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

Name of Employer **1041 McKean Circle LLC** Occupation **Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11646

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Stephen Francis

Mailing Address **4810 33rd Road N**

City **Arlington** State **VA** Zip Code **22207-2802**

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

Name of Employer **Washington Council Ernst & Young** Occupation **Consultant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

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

Transaction ID : A-CF11719

Amount of Each Receipt this Period
600

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

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

5800.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Stephen Francis

Mailing Address 4810 33rd Road N

City State Zip Code
Arlington VA 22207-2802

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

Name of Employer Occupation
Washington Council Ernst & Young Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

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

Transaction ID : A-CF11720

Amount of Each Receipt this Period
400

B. Full Name (Last, First, Middle Initial)
Richard C. Gawenus

Mailing Address 123 Hickory Grove Road

City State Zip Code
Horseheads NY 14845-8595

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

Name of Employer Occupation
self retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
520

Date of Receipt
 M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : A-CF11247

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Richard C. Gawenus

Mailing Address 123 Hickory Grove Road

City State Zip Code
Horseheads NY 14845-8595

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

Name of Employer Occupation
self retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
520

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11394

Amount of Each Receipt this Period
5

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

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

430.00

**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 166
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Dan Gernatt, Jr.		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 13870 Taylor Hollow Road		Transaction ID : A-CF11436
City Collins	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Gernatt Asphalt Products	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000	

Full Name (Last, First, Middle Initial) B. Martin G Glavin		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 90 Knollwood Drive		Transaction ID : A-CF11661
City Rochester	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Ivedix	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) C. Hon. Andrew W Goodell		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 617 Washington Street		Transaction ID : A-CF11445
City Jamestown	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer NYS Assembly	Occupation Assemblyman	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 210	

SUBTOTAL of Receipts This Page (optional).....	2100.00
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 34 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Edward J. Grandt M.D.

Mailing Address 702 Euclid Avenue

City Elmira State NY Zip Code 14901-1919

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

Name of Employer self Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11702

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Hon. Sidney S. Graubard

Mailing Address 481 Wygant Road

City Horseheads State NY Zip Code 14845-1639

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

Name of Employer Chemung County Occupation Legislator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF11316

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Hon. Sidney S. Graubard

Mailing Address 481 Wygant Road

City Horseheads State NY Zip Code 14845-1639

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

Name of Employer Chemung County Occupation Legislator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11395

Amount of Each Receipt this Period
5

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

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

130.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Hon. Sidney S. Graubard

Mailing Address 481 Wygant Road

City Horseheads State NY Zip Code 14845-1639

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

Name of Employer Chemung County Occupation Legislator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11416

Amount of Each Receipt this Period
150

B. Full Name (Last, First, Middle Initial)
Janet M Grissom

Mailing Address 1155 23rd Street NW
Apt. 2C

City Washington State DC Zip Code 20037-3302

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

Name of Employer Peck Madigan Jones Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : A-CF11592

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Peter Guidi

Mailing Address 3104 Knoll Road

City Painted Post State NY Zip Code 14870-9011

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

Name of Employer Ward Manufacturing LLC Occupation CEO & President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF11357

Amount of Each Receipt this Period
100

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: PAGE 36 OF 166
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Peter Guidi

Mailing Address 3104 Knoll Road

City Painted Post State NY Zip Code 14870-9011

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

Name of Employer Ward Manufacturing LLC Occupation CEO & President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11750

Amount of Each Receipt this Period
150

B. Full Name (Last, First, Middle Initial)
Mr. Richard J. Harrison

Mailing Address 44 Southern Parkway

City Rochester State NY Zip Code 14618-1040

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

Name of Employer Five Star Bank Occupation EVP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : A-CF11581

Amount of Each Receipt this Period
350

C. Full Name (Last, First, Middle Initial)
Mr. Vincent Hatton

Mailing Address 163 Watauga Avenue

City Corning State NY Zip Code 14830-3231

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1100**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11705

Amount of Each Receipt this Period
100

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

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

600.00

**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 37 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Peter C Hein

Mailing Address 101 Central Park W
14E

City State Zip Code
New York NY 10023-4250

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

Name of Employer Occupation
Wachtell Lipton Rosen & Katz Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : A-CF11562

Amount of Each Receipt this Period
450

B. Full Name (Last, First, Middle Initial)
Michael Heine

Mailing Address PO Box 280

City State Zip Code
Chemung NY 14825-0280

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

Name of Employer Occupation
Nucor VP& General Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2014

Transaction ID : A-CF11638

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Dr. Robert Heineman

Mailing Address PO Box 1156

City State Zip Code
Alfred NY 14802-0156

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

Name of Employer Occupation
Alfred University teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : A-CF11557

Amount of Each Receipt this Period
350

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Allan D. Hendrickson

Mailing Address **PO Box 309**

City **Jamestown** State **NY** Zip Code **14702-0309**

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

Name of Employer **Chautauqua County Rep. Comm** Occupation **Chairman**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11400

Amount of Each Receipt this Period
200

B. Full Name (Last, First, Middle Initial)
Mr. James R. Houghton

Mailing Address **2649 Spencer Hill Road**

City **Corning** State **NY** Zip Code **14830-9506**

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

Name of Employer **self** Occupation **retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4350**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : A-CF11431

Amount of Each Receipt this Period
1250

C. Full Name (Last, First, Middle Initial)
Mr. Robert W. Hurlbut

Mailing Address **740 East Avenue**

City **Rochester** State **NY** Zip Code **14607-2107**

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

Name of Employer **ROHM Services Corp.** Occupation **Executive**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11639

Amount of Each Receipt this Period
600

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

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

2050.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Robert W. Hurlbut

Mailing Address 740 East Avenue

City Rochester State NY Zip Code 14607-2107

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

Name of Employer ROHM Services Corp. Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11640

Amount of Each Receipt this Period
1400

B. Full Name (Last, First, Middle Initial)
Amy Ioele

Mailing Address 36 Whitestone Lane

City Rochester State NY Zip Code 14618

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

Name of Employer Self Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : A-CF11540

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Amy Ioele

Mailing Address 36 Whitestone Lane

City Rochester State NY Zip Code 14618

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

Name of Employer Self Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : A-CF11541

Amount of Each Receipt this Period
2400

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

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

6400.00

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

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

FOR LINE NUMBER: PAGE 40 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Lori loele

Mailing Address 45 Hunters Pointe

City State Zip Code
Pittsford NY 14534-2479

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

Name of Employer Occupation
Sentry Group HR Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2300

Date of Receipt
 M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : A-CF11542

Amount of Each Receipt this Period
2300

B. Full Name (Last, First, Middle Initial)
Mr. Michael R Jackson

Mailing Address PO Box 795

City State Zip Code
Andover NY 14806-0795

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

Name of Employer Occupation
Otis Eastern Lease Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

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

Transaction ID : A-CF11438

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr. Peter F Jackson

Mailing Address 364 Rt 54 East Lake Rd

City State Zip Code
Penn Yan NY 14527

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

Name of Employer Occupation
self Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375

Date of Receipt
 M M / D D / Y Y Y Y
04 / 15 / 2014

Transaction ID : A-CF11305

Amount of Each Receipt this Period
150

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

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

2950.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Donald A Johnson

Mailing Address 732 Pittsford Victor Road

City Pittsford State NY Zip Code 14534-3938

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

Name of Employer Town & Country Travel Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : A-CF11548

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Ms. Lorraine A Joyce

Mailing Address PO Box 783

City Andover State NY Zip Code 14806-0783

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1550**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11466

Amount of Each Receipt this Period
350

C. Full Name (Last, First, Middle Initial)
Mr. Erland Kailbourne

Mailing Address 2 Pine Hollow

City Mendon State NY Zip Code 14506-9769

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : A-CF11577

Amount of Each Receipt this Period
500

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 42 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Stephen M Kane

Mailing Address 1429 Olean-Portville Rd

City State Zip Code
Westons Mills NY 14788

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

Name of Employer Occupation
Stephen Kane Properties Inc CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : A-CF11576

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mary Kaysa

Mailing Address 716 Monkey Run Road

City State Zip Code
Elmira NY 14901-9218

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

Name of Employer Occupation
Self Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 15 / 2014

Transaction ID : A-CF11296

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Mary Kaysa

Mailing Address 716 Monkey Run Road

City State Zip Code
Elmira NY 14901-9218

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

Name of Employer Occupation
Self Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550

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

Transaction ID : A-CF11442

Amount of Each Receipt this Period
25

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

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

550.00

**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 43 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mary Kaysa

Mailing Address 716 Monkey Run Road

City Elmira State NY Zip Code 14901-9218

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

Name of Employer Self Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : A-CF11590

Amount of Each Receipt this Period
 25

B. Full Name (Last, First, Middle Initial)
Mary Kaysa

Mailing Address 716 Monkey Run Road

City Elmira State NY Zip Code 14901-9218

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

Name of Employer Self Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 28 / 2014

Transaction ID : A-CF11660

Amount of Each Receipt this Period
 25

C. Full Name (Last, First, Middle Initial)
Mary Kaysa

Mailing Address 716 Monkey Run Road

City Elmira State NY Zip Code 14901-9218

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

Name of Employer Self Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF11811

Amount of Each Receipt this Period
 25

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

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

75.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Kraig Kayser

Mailing Address 122 Terrace Drive

City Lake Geneva State WI Zip Code 53147-5033

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

Name of Employer Seneca Foods Occupation President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11672

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Mr. Kraig Kayser

Mailing Address 122 Terrace Drive

City Lake Geneva State WI Zip Code 53147-5033

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

Name of Employer Seneca Foods Occupation President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11673

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Mr Jeffrey Kenefick

Mailing Address 10887 Church Creek Road

City Lindley State NY Zip Code 14858-9677

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

Name of Employer Five Star Bank Occupation Regional President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1150**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 29 / 2014

Transaction ID : A-CF11427

Amount of Each Receipt this Period
350

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

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

5550.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Ms. Lesa Kennedy

Mailing Address 1 Daytona Boulevard

City: Daytona Beach State: FL Zip Code: 32114-1252

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

Name of Employer: NASCAR Occupation: Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **3600**

Date of Receipt: 06 / 02 / 2014

Transaction ID : A-CF11694

Amount of Each Receipt this Period: **1600**

B. Full Name (Last, First, Middle Initial)
Ms. Lesa Kennedy

Mailing Address 1 Daytona Boulevard

City: Daytona Beach State: FL Zip Code: 32114-1252

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

Name of Employer: NASCAR Occupation: Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **3600**

Date of Receipt: 06 / 02 / 2014

Transaction ID : A-CF11695

Amount of Each Receipt this Period: **1000**

C. Full Name (Last, First, Middle Initial)
Mr. Henry Kimball

Mailing Address 26 N Glenora Road

City: Dundee State: NY Zip Code: 14837-8841

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

Name of Employer: Kimball Realty Occupation: Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **250**

Date of Receipt: 05 / 20 / 2014

Transaction ID : A-CF11601

Amount of Each Receipt this Period: **250**

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

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

2850.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
James Kinley

Mailing Address **PO Box 1190**

City **Olean** State **NY** Zip Code **14760-6190**

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

Name of Employer **Kinley Corporation** Occupation **Chairman**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11465

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Ms. Sue B. Kotalik

Mailing Address **4884 County Road 11**

City **Rushville** State **NY** Zip Code **14544-9723**

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

Name of Employer **self** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **440**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF11345

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Ms. Sue B. Kotalik

Mailing Address **4884 County Road 11**

City **Rushville** State **NY** Zip Code **14544-9723**

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

Name of Employer **self** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **440**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11273

Amount of Each Receipt this Period
5

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

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

530.00

**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 47 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. William L. Kreienberg

Mailing Address 218 Whistle Stop Road

City State Zip Code
Pittsford NY 14534-9604

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

Name of Employer Occupation
Harter, Secret, & Emery Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : A-CF11582

Amount of Each Receipt this Period
350

B. Full Name (Last, First, Middle Initial)
Mark LaDouce

Mailing Address 1101 Maple Avenue

City State Zip Code
Elmira NY 14904-2809

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

Name of Employer Occupation
Elmira Water Board General Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : A-CF11372

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. Kevin LaForge

Mailing Address PO Box 425

City State Zip Code
Wellsville NY 14895-0425

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

Name of Employer Occupation
LaForge Disposal General Supervisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 20 / 2014

Transaction ID : A-CF11602

Amount of Each Receipt this Period
500

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

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

1100.00

**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 48 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Erick J. Laine

Mailing Address 215 N 3rd Street

City Olean State NY Zip Code 14760-2505

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

Name of Employer Cutco Occupation Chair Em. (Ret)

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 08 / 2014

Transaction ID : A-CF11553

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mr. Richard A Laudisi

Mailing Address 205 Indigo Creek Drive

City Rochester State NY Zip Code 14626-5100

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

Name of Employer LeChase Construction Occupation VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 06 / 2014

Transaction ID : A-CF11549

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Edward J LaVigne

Mailing Address 2 Fiddlers Green

City Lansing State NY Zip Code 14882-8877

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

Name of Employer Lansing Community Council Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **385**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11404

Amount of Each Receipt this Period
250

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 49 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Edward J LaVigne

Mailing Address 2 Fiddlers Green

City: Lansing State: NY Zip Code: 14882-8877

FEC ID number of contributing federal political committee: C

Name of Employer: Lansing Community Council Occupation: President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 385

Date of Receipt: 04 / 24 / 2014

Transaction ID : A-CF11408

Amount of Each Receipt this Period: 35

B. Full Name (Last, First, Middle Initial)
Bruce P Layton

Mailing Address 1029 Danby Road

City: Ithaca State: NY Zip Code: 14850-5799

FEC ID number of contributing federal political committee: C

Name of Employer: Self Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 225

Date of Receipt: 04 / 11 / 2014

Transaction ID : A-CF11367

Amount of Each Receipt this Period: 25

C. Full Name (Last, First, Middle Initial)
Patrick P Lee

Mailing Address 45 Bryant Woods N

City: Amherst State: NY Zip Code: 14228-3600

FEC ID number of contributing federal political committee: C

Name of Employer: Patrick P. Lee Foundation Occupation: CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 05 / 15 / 2014

Transaction ID : A-CF11586

Amount of Each Receipt this Period: 500

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

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

560.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Patrick P Lee

Mailing Address 45 Bryant Woods N

City Amherst State NY Zip Code 14228-3600

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

Name of Employer Patrick P. Lee Foundation Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11785

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. Warren R. Lehman

Mailing Address 7527 Surrey Lane

City Victor State NY Zip Code 14564-9150

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

Name of Employer Mach 2 Management Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : A-CF11600

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr. Donald J. Leonard

Mailing Address PO Box 361

City Spencer State NY Zip Code 14883-0361

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

Name of Employer Self Occupation Direct Mail Services

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **235**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : A-CF11533

Amount of Each Receipt this Period
50

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 51 OF 166
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Jeffrey R Levey

Mailing Address 7408 Fairfax Road

City State Zip Code
Bethesda MD 20814-1241

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

Name of Employer Occupation
Citigroup Inc Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 17 / 2014

Transaction ID : A-CF11237

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Benjamin D Lewis

Mailing Address 2516 Carlson Road

City State Zip Code
Jamestown NY 14701-9351

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

Name of Employer Occupation
Self Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
815

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : A-CF11333

Amount of Each Receipt this Period
75

C. Full Name (Last, First, Middle Initial)
Benjamin D Lewis

Mailing Address 2516 Carlson Road

City State Zip Code
Jamestown NY 14701-9351

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

Name of Employer Occupation
Self Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
815

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

Transaction ID : A-CF11455

Amount of Each Receipt this Period
5

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

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

1080.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Benjamin D Lewis

Mailing Address 2516 Carlson Road

City State Zip Code
Jamestown NY 14701-9351

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **815**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11755

Amount of Each Receipt this Period
300

B. Full Name (Last, First, Middle Initial)
Mr. Peter C. Lutz

Mailing Address 54 Mahogany Run

City State Zip Code
Pittsford NY 14534-9425

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

Name of Employer Bond Schoeneck Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11641

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Diane MacPherson Major

Mailing Address 300 New Jersey Avenue NW Suite 900

City State Zip Code
Washington DC 20001-2271

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

Name of Employer D. Major Group Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

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

Transaction ID : A-CF11726

Amount of Each Receipt this Period
250

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Edward T Marks

Mailing Address 5505 State Route 414

City	State	Zip Code
Hector	NY	14841-9721

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

Name of Employer	Occupation
Atwater Estate Vineyards	Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1475

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : A-CF11596

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Edward T Marks

Mailing Address 5505 State Route 414

City	State	Zip Code
Hector	NY	14841-9721

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

Name of Employer	Occupation
Atwater Estate Vineyards	Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1475

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11780

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Ms Erin M Martinko

Mailing Address 601 Pennsylvania Avenue NW
Suite 225

City	State	Zip Code
Washington	DC	20004-2601

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

Name of Employer	Occupation
USAA	Director, Federal Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y
04 / 16 / 2014

Transaction ID : A-CF11254

Amount of Each Receipt this Period
246.06

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

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

521.06

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Timothy Mason

Mailing Address 400 Whitney Rd

City Penfield State NY Zip Code 14526

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

Name of Employer Mason Marketing Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : A-CF11543

Amount of Each Receipt this Period
 500

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

B. Full Name (Last, First, Middle Initial)
Timothy Mason

Mailing Address 400 Whitney Rd

City Penfield State NY Zip Code 14526

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

Name of Employer Mason Marketing Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : A-PIP1624

Amount of Each Receipt this Period
 500

[MEMO ITEM]
Partnership Itemization Memo

C. Full Name (Last, First, Middle Initial)
Walter G Mayfield

Mailing Address PO Box 570365

City Houston State TX Zip Code 77257-0365

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

Name of Employer Goldston Oil Corporation Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF11876

Amount of Each Receipt this Period
 2600

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 55 OF 166
	<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)
Tom Reed for Congress

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

Mailing Address 7108 Rebecca Drive

City Alexandria State VA Zip Code 22307-1834

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

Name of Employer Bockorny Group Occupation Dir. Congressional & Public Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : A-CF11725

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. Donald S. Mazzullo

Mailing Address 1600 Bausch And Lomb Place

City Rochester State NY Zip Code 14604-2711

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

Name of Employer Harter, Secret, & Emery Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF11687

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Curtis W Mewbourne

Mailing Address 504 Rudman Road

City Tyler State TX Zip Code 75701-7726

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

Name of Employer Mewbourne Oil Company Occupation Oil & Gas Producer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF11873

Amount of Each Receipt this Period
2600

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 56 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Anthony Meyer

Mailing Address 767 5th Avenue
Floor 18

City New York State NY Zip Code 10153-0033

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

Name of Employer Ocean Road Advisors Occupation Entrepreneur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF11896

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Michael J Minarovic

Mailing Address 2 Grand Regency Circle

City Spring State TX Zip Code 77382-1608

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

Name of Employer Arena Energy Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF11877

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
David L. Mosher

Mailing Address 1059 Pennsylvania Avenue

City Elmira State NY Zip Code 14904-2540

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
780

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2014

Transaction ID : A-CF11385

Amount of Each Receipt this Period
25

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

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

3625.00

**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 57 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. John F. O'Mara

Mailing Address 84 Oak Hill Road

City Horseheads State NY Zip Code 14845-8113

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

Name of Employer Davidson & O'Mara Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11647

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Thomas T Olson

Mailing Address PO Box 518

City Celoron State NY Zip Code 14720-0518

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

Name of Employer Jamestown Macadem, Inc. Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

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

Transaction ID : A-CF11443

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Joseph F Oscsodal

Mailing Address 2410 Morcrest Drive

City Corning State NY Zip Code 14830-9227

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

Name of Employer Sport Skills Development Ent Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **725**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11417

Amount of Each Receipt this Period
100

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

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

1100.00

**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 166
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Joseph F Oscsodal

Mailing Address 2410 Morrcrest Drive

City State Zip Code
Corning NY 14830-9227

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

Name of Employer Occupation
Sport Skills Development Ent President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
725

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11693

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Ellis Oster

Mailing Address 250 Mile Crossing Boulevard
Suite 1

City State Zip Code
Rochester NY 14624-6242

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

Name of Employer Occupation
Shapiro & DiCaro Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11745

Amount of Each Receipt this Period
300

C. Full Name (Last, First, Middle Initial)
Oswaldo Palomo

Mailing Address 446 Sturges Road

City State Zip Code
Fairfield CT 06824-2851

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

Name of Employer Occupation
ADS Ventures Sr. VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11897

Amount of Each Receipt this Period
2000

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

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

2325.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Walter T Parkes

Mailing Address 830 Phillips Road

City Victor State NY Zip Code 14564-9417

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

Name of Employer O'Connell Electric Company Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF11341

Amount of Each Receipt this Period
600

B. Full Name (Last, First, Middle Initial)
Mr. Walter T Parkes

Mailing Address 830 Phillips Road

City Victor State NY Zip Code 14564-9417

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

Name of Employer O'Connell Electric Company Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF11342

Amount of Each Receipt this Period
400

C. Full Name (Last, First, Middle Initial)
Mr. David L. Parnley

Mailing Address PO Box 667

City Hornell State NY Zip Code 14843-0667

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

Name of Employer Covered Wagon Tours LLC Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : A-CF11432

Amount of Each Receipt this Period
500

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 60 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Roland P. Penta

Mailing Address 13 Bay View Terrace

City Geneva State NY Zip Code 14456-9783

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

Name of Employer Phelps Sungas Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1550**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 23 / 2014

Transaction ID : A-CF11624

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
John R Piccirilli

Mailing Address 16 Stonebridge Lane

City Pittsford State NY Zip Code 14534-1800

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

Name of Employer HNP Capital LLC Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : A-CF11290

Amount of Each Receipt this Period
350

C. Full Name (Last, First, Middle Initial)
John Prendergast

Mailing Address 45 S Kashong Point

City Geneva State NY Zip Code 14456-9601

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

Name of Employer Clarkson University Occupation Deputy Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1335**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11279

Amount of Each Receipt this Period
5

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

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

855.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
James W Ray Jr.

Mailing Address 400 Barnes Hill Road

City Newfield State NY Zip Code 14867-9765

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

Name of Employer Jim Ray Homes Inc Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 11 / 2014

Transaction ID : A-CF11365

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
James W Ray Jr.

Mailing Address 400 Barnes Hill Road

City Newfield State NY Zip Code 14867-9765

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

Name of Employer Jim Ray Homes Inc Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 11 / 2014

Transaction ID : A-CF11371

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. Floyd Rayburn

Mailing Address 3791 State Route 5 And 20

City Canandaigua State NY Zip Code 14424-9528

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

Name of Employer Rayburn Masonry Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11676

Amount of Each Receipt this Period
1000

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

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

1275.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Thomas E Reagan Jr.

Mailing Address 34 Steuben Street

City Addison State NY Zip Code 14801-1214

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

Name of Employer Pinnacle State Park Golf Clu Occupation General Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11804

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Taylor L Reid

Mailing Address 402 Shadywood Road

City Houston State TX Zip Code 77057-1420

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

Name of Employer Oasis Petroleum Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11711

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Taylor L Reid

Mailing Address 402 Shadywood Road

City Houston State TX Zip Code 77057-1420

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

Name of Employer Oasis Petroleum Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11874

Amount of Each Receipt this Period
1600

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 63 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Taylor L Reid

Mailing Address 402 Shadywood Road

City Houston State TX Zip Code 77057-1420

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

Name of Employer Oasis Petroleum Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11875

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Jim Richards

Mailing Address 6438 Noble Drive

City Mc Lean State VA Zip Code 22101-5263

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

Name of Employer Cornerstone Govt Affairs Occupation VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750**

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

Transaction ID : A-CF11727

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Edward J Riley

Mailing Address 15 Kellogg Place

City Salamanca State NY Zip Code 14779-1229

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1130**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF11328

Amount of Each Receipt this Period
50

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

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

2050.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Geoffrey Rosenberger

Mailing Address 7 Lily Pond Lane

City State Zip Code
Pittsford NY 14534-3907

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

Name of Employer Occupation
Lily Pond Ventures investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : A-CF11662

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Marc Rowan

Mailing Address 927 5th Avenue
Floor 6

City State Zip Code
New York NY 10021-2679

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

Name of Employer Occupation
Apollo Management Investment Professional

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11813

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Marc Rowan

Mailing Address 927 5th Avenue
Floor 6

City State Zip Code
New York NY 10021-2679

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

Name of Employer Occupation
Apollo Management Investment Professional

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11814

Amount of Each Receipt this Period
2600

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

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

5700.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Joseph Rulison

Mailing Address 150 Pelham Road

City Rochester State NY Zip Code 14610-2520

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

Name of Employer JP Morgan Chase Occupation Managing Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 29 / 2014

Transaction ID : A-CF11426

Amount of Each Receipt this Period
350

B. Full Name (Last, First, Middle Initial)
Mr. Brian D. Rusk

Mailing Address 340 Wellingwood Drive

City East Amherst State NY Zip Code 14051-1753

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

Name of Employer NYS Thruway Auth Occupation Public Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **685**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF11319

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Mr. Brian D. Rusk

Mailing Address 340 Wellingwood Drive

City East Amherst State NY Zip Code 14051-1753

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

Name of Employer NYS Thruway Auth Occupation Public Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **685**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11703

Amount of Each Receipt this Period
100

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

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

475.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. E. Philip Saunders

Mailing Address 762 Brooks Avenue

City Rochester State NY Zip Code 14619-2234

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

Name of Employer Torvec Occupation Exec

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

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

Transaction ID : A-CF11532

Amount of Each Receipt this Period
300

B. Full Name (Last, First, Middle Initial)
Albert Schiff

Mailing Address 11 Mohawk Lane

City Greenwich State CT Zip Code 06831-3125

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

Name of Employer LionStreet Occupation Managing Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 04 / 2014

Transaction ID : A-CF11565

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Eugene Segar

Mailing Address 473 Anderson Hill Road

City Candor State NY Zip Code 13743-2407

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : A-CF11322

Amount of Each Receipt this Period
300

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

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

1600.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Edgar W Seymour

Mailing Address 2 Kirby Drive

City Freeville State NY Zip Code 13068-9756

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **635**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11406

Amount of Each Receipt this Period
200

B. Full Name (Last, First, Middle Initial)
Jessica C Shanahan

Mailing Address 4 Knollwood Drive

City Rochester State NY Zip Code 14618-3513

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

Name of Employer Self Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11680

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Jeffrey Shapiro

Mailing Address 1325 13th Street NW Apt. 26

City Washington State DC Zip Code 20005-4453

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

Name of Employer Peck Madigan Jones Occupation consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11779

Amount of Each Receipt this Period
1000

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

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

2200.00

**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 12 11b 13a 11c 13b 11d 14 15
 PAGE 68 OF 166

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Randy M Shayler

Mailing Address PO Box 330

City: Wellsville State: NY Zip Code: 14895-0330

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

Name of Employer: Otis-Eastern, Inc. Occupation: Director, Resource Mgt

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: **05 / 13 / 2014**

Transaction ID : A-CF11578

Amount of Each Receipt this Period: **500**

B. Full Name (Last, First, Middle Initial)
Mr. Kelly M. Shea

Mailing Address 11 San Gabriel Drive

City: Rochester State: NY Zip Code: 14610-2833

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

Name of Employer: Landmark Group Occupation: Insurance Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: **05 / 05 / 2014**

Transaction ID : A-CF11528

Amount of Each Receipt this Period: **500**

C. Full Name (Last, First, Middle Initial)
Mr. R. Bradley Smith

Mailing Address 20 Grannan Drive

City: Corning State: NY Zip Code: 14830-2422

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

Name of Employer: John C. Lowery Inc Occupation: VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **650**

Date of Receipt: **04 / 24 / 2014**

Transaction ID : A-CF11375

Amount of Each Receipt this Period: **150**

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

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

1150.00

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

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

FOR LINE NUMBER: PAGE 69 OF 166
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. R. Bradley Smith

Mailing Address 20 Grannan Drive

City State Zip Code
Corning NY 14830-2422

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

Name of Employer Occupation
John C. Lowery Inc VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11652

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. William T. Smith III

Mailing Address 828 Amaryllis Lane

City State Zip Code
Venice FL 34292-6641

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

Name of Employer Occupation
Self Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11373

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
William E. Smith

Mailing Address 3754 Weinhauer Hill Road

City State Zip Code
Wellsville NY 14895-9526

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

Name of Employer Occupation
Self Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1450

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

Transaction ID : A-CF11440

Amount of Each Receipt this Period
500

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

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

850.00

**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 70 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. John P. Socha

Mailing Address 3434 N Plum Point Road

City Himrod State NY Zip Code 14842-9772

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

Name of Employer Town of Himrod Occupation Deputy Supervisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **255**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 15 / 2014

Transaction ID : A-CF11308

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Mr. John P. Socha

Mailing Address 3434 N Plum Point Road

City Himrod State NY Zip Code 14842-9772

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

Name of Employer Town of Himrod Occupation Deputy Supervisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **255**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11269

Amount of Each Receipt this Period
20

C. Full Name (Last, First, Middle Initial)
Mr. John P. Socha

Mailing Address 3434 N Plum Point Road

City Himrod State NY Zip Code 14842-9772

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

Name of Employer Town of Himrod Occupation Deputy Supervisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **255**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11272

Amount of Each Receipt this Period
10

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

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

55.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. John P. Socha

Mailing Address 3434 N Plum Point Road

City Himrod State NY Zip Code 14842-9772

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

Name of Employer Town of Himrod Occupation Deputy Supervisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **255**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11787

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Joseph F. Spitz

Mailing Address 11384 E Lake Road

City Hammondsport State NY Zip Code 14840-7001

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF11318

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Joseph F. Spitz

Mailing Address 11384 E Lake Road

City Hammondsport State NY Zip Code 14840-7001

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11378

Amount of Each Receipt this Period
40

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

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

165.00

**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 72 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Joseph F. Spitz

Mailing Address 11384 E Lake Road

City Hammondspport State NY Zip Code 14840-7001

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11812

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Mrs. Lisa A. Stephen

Mailing Address 1877 Wolf Creek Road

City Cuba State NY Zip Code 14727-9578

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

Name of Employer Wayne Concrete Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **590**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11469

Amount of Each Receipt this Period
90

C. Full Name (Last, First, Middle Initial)
Wayne A Stephen

Mailing Address 1827 Wolf Creek Road

City Cuba State NY Zip Code 14727-9578

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

Name of Employer Wayne Gravel Products Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 13 / 2014

Transaction ID : A-CF11580

Amount of Each Receipt this Period
350

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

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

540.00

**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 73 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Irby D Sullivan

Mailing Address 9 Reynolds Street

City Alfred State NY Zip Code 14802-1111

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

Name of Employer Alfred State College Occupation Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 08 / 2014

Transaction ID : A-CF11555

Amount of Each Receipt this Period
350

B. Full Name (Last, First, Middle Initial)
A. Alfred Taubman

Mailing Address 200 E Long Lake Road Suite 180

City Bloomfield Hills State MI Zip Code 48304-2336

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

Name of Employer Self Occupation Real Estate Deveoper

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11667

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
A. Alfred Taubman

Mailing Address 200 E Long Lake Road Suite 180

City Bloomfield Hills State MI Zip Code 48304-2336

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

Name of Employer Self Occupation Real Estate Deveoper

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11668

Amount of Each Receipt this Period
2600

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

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

5550.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Judith M Taubman

Mailing Address 200 E Long Lake Road
Suite 180

City Bloomfield Hills State MI Zip Code 48304-2336

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

Name of Employer Self Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11669

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Judith M Taubman

Mailing Address 200 E Long Lake Road
Suite 180

City Bloomfield Hills State MI Zip Code 48304-2336

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

Name of Employer Self Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11670

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Michael M. Terwilliger

Mailing Address 3430 Slaterville Road

City Brooktondale State NY Zip Code 14817-9738

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **205**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : A-CF11244

Amount of Each Receipt this Period
25

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

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

5225.00

**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 75 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Lewis Topper

Mailing Address 3605 Camp Mineola Road

City Mattituck State NY Zip Code 11952-2150

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

Name of Employer Fast Food Systems Inc Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF11781

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Mr. G. Thomas Tranter Jr.

Mailing Address 116 Kennedy Drive

City Horseheads State NY Zip Code 14845-2255

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

Name of Employer Corning Enterprises Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1850

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 27 / 2014

Transaction ID : A-CF11648

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Jeffrey B True

Mailing Address 55 Highgate Circle

City Ithaca State NY Zip Code 14850-1487

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

Name of Employer IEEJ Occupation Insurance Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
285

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : A-CF11414

Amount of Each Receipt this Period
10

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

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

3110.00

**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 76 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Thomas A Turner

Mailing Address 33 E Lake Street

City State Zip Code
Lakewood NY 14750-1205

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

Name of Employer Occupation
Century 21 Turner Brokers Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
725

Date of Receipt
 M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : A-CF11339

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
James E. Verdi

Mailing Address 30 N Union Street
Suite 202

City State Zip Code
Rochester NY 14607-1345

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

Name of Employer Occupation
Walter C. Taylor Agency Exec

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : A-CF11569

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Kevin Voorhees

Mailing Address 3397 Patchett Road

City State Zip Code
Baldwinsville NY 13027-9219

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

Name of Employer Occupation
Barton and Loguidice PC Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : A-CF11386

Amount of Each Receipt this Period
25

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

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

550.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
J.C. Walter III

Mailing Address 1100 Louisiana Street

City Houston State TX Zip Code 77002-5227

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

Name of Employer: Walter Oil & Gas Corporation Occupation: Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **2600**

Date of Receipt: **06 / 04 / 2014**

Transaction ID : A-CF11872

Amount of Each Receipt this Period: **2600**

B. Full Name (Last, First, Middle Initial)
Wesley R Weis

Mailing Address 11 Old Tappan Road

City Old Tappan State NJ Zip Code 07675-7479

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

Name of Employer: Mikab Corp Occupation: CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **1100**

Date of Receipt: **04 / 17 / 2014**

Transaction ID : A-CF11238

Amount of Each Receipt this Period: **100**

C. Full Name (Last, First, Middle Initial)
Mr. L. Chandler Whitford

Mailing Address PO Box 563

City Wellsville State NY Zip Code 14895-0563

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

Name of Employer: LC Whitford Occupation: Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **1775**

Date of Receipt: **04 / 17 / 2014**

Transaction ID : A-CF11248

Amount of Each Receipt this Period: **25**

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

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

2725.00

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

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

FOR LINE NUMBER: PAGE 78 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mr. L. Chandler Whitford

Mailing Address **PO Box 563**

City **Wellsville** State **NY** Zip Code **14895-0563**

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

Name of Employer **LC Whitford** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1775**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : A-CF11554

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Stanley Widger

Mailing Address **21 Gabriel Dr**

City **Rochester** State **NY** Zip Code **14610**

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

Name of Employer **Nixon Peabody LLP** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11692

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Arthur Wolcott

Mailing Address **1606 Main Street
Suite 1010**

City **Sarasota** State **FL** Zip Code **34236-5811**

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

Name of Employer **Seneca Foods Corporation** Occupation **Chairman**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11643

Amount of Each Receipt this Period
500

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 79 OF 166
	<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)
Tom Reed for Congress

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

Mailing Address 3165 Brighton Henrietta TI Road

City Rochester	State NY	Zip Code 14623-2751
-------------------	-------------	------------------------

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

Name of Employer Wright Wisner Corp	Occupation President
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		23		2014

Transaction ID : A-CF11623

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. Craig Yunker

Mailing Address 6460 Transit Road

City Elba	State NY	Zip Code 14058-9706
--------------	-------------	------------------------

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

Name of Employer CY Farms	Occupation President
------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		02		2014

Transaction ID : A-CF11700

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Bruce B Zicari

Mailing Address 302 Inwood Drive

City Rochester	State NY	Zip Code 14625-1911
-------------------	-------------	------------------------

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

Name of Employer Bonadio	Occupation Partner
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
520.83

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		06		2014

Transaction ID : A-CF11545

Amount of Each Receipt this Period
500

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 80 OF 166
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Robert Ziff		Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 350 Park Avenue Floor 11		Transaction ID : A-CF11632
City State Zip Code New York NY 10022-6022	Amount of Each Receipt this Period 2600	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Ziff Brothers Investments Eecutive	Amount of Each Receipt this Period 5200
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

Full Name (Last, First, Middle Initial) B. Robert Ziff		Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 350 Park Avenue Floor 11		Transaction ID : A-CF11633
City State Zip Code New York NY 10022-6022	Amount of Each Receipt this Period 2600	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Ziff Brothers Investments Eecutive	Amount of Each Receipt this Period 5200
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City State Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	141880.06

**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 81 OF 166
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Committee To Re-Elect Judge Mulvey

Full Name (Last, First, Middle Initial)
Committee To Re-Elect Judge Mulvey

Mailing Address PO Box 367

City Dryden State NY Zip Code 13053-0367

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : A-CF11292

Amount of Each Receipt this Period

Permissible funds

B. Friends of Brian Kolb

Full Name (Last, First, Middle Initial)
Friends of Brian Kolb

Mailing Address PO Box 835

City Canandaigua State NY Zip Code 14424-0835

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : A-CF11401

Amount of Each Receipt this Period

Permissible funds

C. Steuben County Republican Committee

Full Name (Last, First, Middle Initial)
Steuben County Republican Committee

Mailing Address 310 Maple Heights

City Bath State NY Zip Code 14810-9302

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : A-CF11748

Amount of Each Receipt this Period

Permissible Funds

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

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 82 OF 166
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Westfield Republican Committee

Mailing Address 39 Clinton Street

City State Zip Code
Westfield NY 14787-1032

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100

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

Transaction ID : A-CF11444

Amount of Each Receipt this Period
 100

Permissible Funds

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

100.00

1375.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Action Committee for Rural Electrification

Mailing Address 4301 Wilson Boulevard
Suite 1

City State Zip Code
Arlington VA 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : A-CF11608

Amount of Each Receipt this Period
1500

B. Full Name (Last, First, Middle Initial)
Action Committee for Rural Electrification

Mailing Address 4301 Wilson Boulevard
Suite 1

City State Zip Code
Arlington VA 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : A-CF11609

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Aetna Inc. PAC

Mailing Address 20 F Street NW
Suite 350

City State Zip Code
Washington DC 20001-6706

FEC ID number of contributing federal political committee. **C** C00181826

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : A-CF11605

Amount of Each Receipt this Period
4500

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

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

8500.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
AFLAC Incorporated PAC

Mailing Address 1932 Wynnton Road

City Columbus State GA Zip Code 31999-0001

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

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

Transaction ID : A-CF11717

Amount of Each Receipt this Period
1500

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

Mailing Address 220 Leigh Farm Road

City Durham State NC Zip Code 27707-8110

FEC ID number of contributing federal political committee. **C C00077321**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 16 / 2014

Transaction ID : A-CF11594

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Alston & Bird PAC

Mailing Address 601 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00395723**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 22 / 2014

Transaction ID : A-CF11612

Amount of Each Receipt this Period
5000

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

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

9000.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Alston & Bird PAC

Mailing Address 601 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00395723**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
05 / 22 / 2014

Transaction ID : A-CF11613

Amount of Each Receipt this Period
5000

B. Full Name (Last, First, Middle Initial)
American Academy of Dermatology Assoc.

Mailing Address 1445 New York Avenue NW
Suite 800

City Washington State DC Zip Code 20005-2125

FEC ID number of contributing federal political committee. **C C00359539**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500

Date of Receipt
 M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : A-CF11242

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
American Assn of Nurse Practitioners PAC

Mailing Address 225 Reinekers Lane
Suite 525

City Alexandria State VA Zip Code 22314-2880

FEC ID number of contributing federal political committee. **C C00358903**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11883

Amount of Each Receipt this Period
1000

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 86 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
American Benefits Council PAC

Mailing Address 1501 M Street NW
Suite 600

City Washington State DC Zip Code 20005-1775

FEC ID number of contributing federal political committee. **C** C00153171

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF11806

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
American Crystal Sugar PAC

Mailing Address 101 3rd Street N

City Moorhead State MN Zip Code 56560-1952

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2014

Transaction ID : A-CF11593

Amount of Each Receipt this Period
 5000

C. Full Name (Last, First, Middle Initial)
American Medical Association PAC

Mailing Address 25 Massachusetts Avenue NW
Suite 600

City Washington State DC Zip Code 20001-7400

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

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

Transaction ID : A-CF11718

Amount of Each Receipt this Period
 1000

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 87 OF 166
	<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)
Tom Reed for Congress

A. American Optometric Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1505 Prince Street
Suite 300

City Alexandria State VA Zip Code 22314-2874

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 22 / 2014

Transaction ID : A-CF11614

Amount of Each Receipt this Period
1500

B. Austin Scott for Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2530

City Tifton State GA Zip Code 31793-2530

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 27 / 2014

Transaction ID : A-CF11635

Amount of Each Receipt this Period
1500

C. Automotive Free Intl Trade PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1625 Prince Street
Stop 225

City Alexandria State VA Zip Code 22314-2882

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500

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

Transaction ID : A-CF11734

Amount of Each Receipt this Period
2500

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

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

5500.00

**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 166
	<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)
Tom Reed for Congress

A. Automotive Free Intl Trade PAC

Full Name (Last, First, Middle Initial)
Automotive Free Intl Trade PAC

Mailing Address 1625 Prince Street
Stop 225

City Alexandria State VA Zip Code 22314-2882

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500

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

Transaction ID : A-CF11735

Amount of Each Receipt this Period
500

B. Ball Corporation PAC

Full Name (Last, First, Middle Initial)
Ball Corporation PAC

Mailing Address PO Box 5000

City Broomfield State CO Zip Code 80038-5000

FEC ID number of contributing federal political committee. **C** C00039461

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2014

Transaction ID : A-CF11241

Amount of Each Receipt this Period
1000

C. Bank Of America PAC

Full Name (Last, First, Middle Initial)
Bank Of America PAC

Mailing Address 1455 Pennsylvania Avenue NW
Suite 950

City Washington State DC Zip Code 20004-1043

FEC ID number of contributing federal political committee. **C** C00364778

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF11714

Amount of Each Receipt this Period
2500

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 89 OF 166
	<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)
Tom Reed for Congress

A. Best Buy Co Inc PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 7601 Penn Avenue S
 City Richfield State MN Zip Code 55423-3645
 FEC ID number of contributing federal political committee. **C** C00405076
 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
 06 / 04 / 2014
Transaction ID : A-CF11878
 Amount of Each Receipt this Period
 1000

B. Bryan Cave LLP PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 13th Street NW Suite 700
 City Washington State DC Zip Code 20005-6619
 FEC ID number of contributing federal political committee. **C** C00332643
 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
 06 / 02 / 2014
Transaction ID : A-CF11666
 Amount of Each Receipt this Period
 1000

C. BuildPAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1201 15th Street NW
 City Washington State DC Zip Code 20005-2842
 FEC ID number of contributing federal political committee. **C** C00000901
 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
 06 / 02 / 2014
Transaction ID : A-CF11683
 Amount of Each Receipt this Period
 1000

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 90 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Burns & McDonnell Inc PAC

Mailing Address 9400 Ward Parkway

City Kansas City State MO Zip Code 64114-3319

FEC ID number of contributing federal political committee. **C** C00442913

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2014

Transaction ID : A-CF11610

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
Calpine Corporation PAC

Mailing Address 4160 Dublin Boulevard Suite 100

City Dublin State CA Zip Code 94568-7755

FEC ID number of contributing federal political committee. **C** C00362640

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2014

Transaction ID : A-CF11622

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
Chesapeake Energy Corporation

Mailing Address PO Box 18576

City Oklahoma City State OK Zip Code 73154-0576

FEC ID number of contributing federal political committee. **C** C00389288

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF11671

Amount of Each Receipt this Period
 4000

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

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

6000.00

**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 91 OF 166
	<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)
Tom Reed for Congress

A. Cigna PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 Pennsylvania Avenue NW
 South Bldg - Suite 835
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C C00085316**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 3500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : A-CF11243
 Amount of Each Receipt this Period
 3500

B. Committee for Preservation of Capitalism
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 65314
 City Washington State DC Zip Code 20035-5314
 FEC ID number of contributing federal political committee. **C C00328468**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014
Transaction ID : A-CF11871
 Amount of Each Receipt this Period
 5000

C. Covidien PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 8th Street NW
 Suite 620
 City Washington State DC Zip Code 20001-3854
 FEC ID number of contributing federal political committee. **C C00433490**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014
Transaction ID : A-CF11882
 Amount of Each Receipt this Period
 2000

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

10500.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
CULAC of Credit Union National Assoc PAC

Mailing Address 601 Pennsylvania Avenue NW
South Building, Suite 600

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
05 / 28 / 2014

Transaction ID : A-CF11654

Amount of Each Receipt this Period
1500

B. Full Name (Last, First, Middle Initial)
DaVita Inc PAC

Mailing Address 500 N Capitol Street NW
Suite 300

City Washington State DC Zip Code 20001-7407

FEC ID number of contributing federal political committee. **C C00340943**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11805

Amount of Each Receipt this Period
2000

C. Full Name (Last, First, Middle Initial)
Dealers Election Action Committee/National Auto (NADA)

Mailing Address 412 1st Street SE
Suite 200

City Washington State DC Zip Code 20003-1804

FEC ID number of contributing federal political committee. **C C00040998**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11674

Amount of Each Receipt this Period
2500

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

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

6000.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Deloitte Federal PAC

Mailing Address PO Box 365

City Washington State DC Zip Code 20044-0365

FEC ID number of contributing federal political committee. **C C00211318**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5500**

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

Transaction ID : A-CF11728

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
Deloitte Federal PAC

Mailing Address PO Box 365

City Washington State DC Zip Code 20044-0365

FEC ID number of contributing federal political committee. **C C00211318**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5500**

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

Transaction ID : A-CF11729

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Exelis Employees PAC

Mailing Address 1650 Tysons Boulevard Suite 1700

City McLean State VA Zip Code 22102-4827

FEC ID number of contributing federal political committee. **C C00141002**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

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

Transaction ID : A-CF11721

Amount of Each Receipt this Period
1000

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 94 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Exelon PAC

Mailing Address 101 Constitution Avenue NW
Suite 400

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 20 / 2014

Transaction ID : A-CF11603

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
Exelon PAC

Mailing Address 101 Constitution Avenue NW
Suite 400

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 20 / 2014

Transaction ID : A-CF11604

Amount of Each Receipt this Period
2000

C. Full Name (Last, First, Middle Initial)
Express Scripts Inc. PAC

Mailing Address 300 New Jersey Avenue NW
Suite 600

City Washington State DC Zip Code 20001-2267

FEC ID number of contributing federal political committee. **C** C00365072

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

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

Transaction ID : A-CF11723

Amount of Each Receipt this Period
1000

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

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

5000.00

**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 166
	<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)
Tom Reed for Congress

A. General Electric PAC

Full Name (Last, First, Middle Initial)
General Electric PAC

Mailing Address **1299 Pennsylvania Avenue NW
Suite 900W**

City **Washington** State **DC** Zip Code **20004-2400**

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **9000**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11868

Amount of Each Receipt this Period
 _____ **2000** _____

B. Good Fund

Full Name (Last, First, Middle Initial)
Good Fund

Mailing Address **PO Box 3404**

City **Alexandria** State **VA** Zip Code **22302-0404**

FEC ID number of contributing federal political committee. **C C00409185**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 28 / 2014

Transaction ID : A-CF11655

Amount of Each Receipt this Period
 _____ **1000** _____

C. HDR

Full Name (Last, First, Middle Initial)
HDR

Mailing Address **8404 Indian Hills Drive**

City **Omaha** State **NE** Zip Code **68114-4049**

FEC ID number of contributing federal political committee. **C C00103903**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11630

Amount of Each Receipt this Period
 _____ **2500** _____

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

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

_____ **5500.00** _____

_____ _____

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Honeywell International PAC

Mailing Address 101 Constitution Avenue NW
Suite 500W

City Washington State DC Zip Code 20001-2177

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9055.83

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11712

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Honeywell International PAC

Mailing Address 101 Constitution Avenue NW
Suite 500W

City Washington State DC Zip Code 20001-2177

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9055.83

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11713

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
House Conservatives Fund

Mailing Address 228 S Washington Street
Suite 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C C00326439**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : A-CF11607

Amount of Each Receipt this Period
5000

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: PAGE 97 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
KPMG PAC

Mailing Address **PO Box 18254**

City **Washington** State **DC** Zip Code **20036-8254**

FEC ID number of contributing federal political committee. **C C00280222**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11884

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
KPMG PAC

Mailing Address **PO Box 18254**

City **Washington** State **DC** Zip Code **20036-8254**

FEC ID number of contributing federal political committee. **C C00280222**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11887

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Lowe's Corporation PAC

Mailing Address **555 12th Street NW
Suite 620**

City **Washington** State **DC** Zip Code **20004-1212**

FEC ID number of contributing federal political committee. **C C00416495**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

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

Transaction ID : A-CF11722

Amount of Each Receipt this Period
1000

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 98 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Making America Prosperous

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152-0485

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **6000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11628

Amount of Each Receipt this Period
4000

B. Full Name (Last, First, Middle Initial)
Making America Prosperous

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152-0485

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **6000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11629

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
McKesson Corporation Employees PAC

Mailing Address One Post Street
32nd Floor

City San Francisco State CA Zip Code 94101

FEC ID number of contributing federal political committee. **C C00108035**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

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

Transaction ID : A-CF11715

Amount of Each Receipt this Period
5000

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

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

10000.00

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

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

FOR LINE NUMBER: PAGE 99 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Metlife Inc
 Full Name (Last, First, Middle Initial)
 Mailing Address 1620 L Street NW
 Suite 800
 City Washington State DC Zip Code 20036-5629
 FEC ID number of contributing federal political committee. **C** C00040923
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 7000

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 17 / 2014
Transaction ID : A-CF11240
 Amount of Each Receipt this Period
 2000

B. Morgan Stanley PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 9th Street NW
 Suite 650
 City Washington State DC Zip Code 20004-2151
 FEC ID number of contributing federal political committee. **C** C00337626
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 8000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014
Transaction ID : A-CF11886
 Amount of Each Receipt this Period
 1000

C. MVP Health Care, Inc. Federal PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 625 State Street
 City Schenectady State NY Zip Code 12305-2111
 FEC ID number of contributing federal political committee. **C** C00431429
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 7000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014
Transaction ID : A-CF11799
 Amount of Each Receipt this Period
 500

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 100 OF 166
	<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)
Tom Reed for Congress

A. MVP Health Care, Inc. Federal PAC

Full Name (Last, First, Middle Initial)
MVP Health Care, Inc. Federal PAC

Mailing Address 625 State Street

City State Zip Code
Schenectady NY 12305-2111

FEC ID number of contributing federal political committee. **C** C00431429

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF11800

Amount of Each Receipt this Period
2000

B. Nat. Assn. of Broadcasters

Full Name (Last, First, Middle Initial)
Nat. Assn. of Broadcasters

Mailing Address 1771 N Street NW

City State Zip Code
Washington DC 20036-2800

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

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

Transaction ID : A-CF11523

Amount of Each Receipt this Period
1000

C. Nat. Assoc. of Convenience Stores PAC

Full Name (Last, First, Middle Initial)
Nat. Assoc. of Convenience Stores PAC

Mailing Address 1600 Duke Street

City State Zip Code
Alexandria VA 22314-3466

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 27 / 2014

Transaction ID : A-CF11644

Amount of Each Receipt this Period
2500

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

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

5500.00

**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 166	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. National Assoc. of Chain Drugstores Inc.

Full Name (Last, First, Middle Initial)
Mailing Address 1776 Wilson Boulevard
Suite 200

City State Zip Code
Arlington VA 22209-2516

FEC ID number of contributing federal political committee. **C C00022368**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11783

Amount of Each Receipt this Period
1000

B. National Association of Federal Credit Unions

Full Name (Last, First, Middle Initial)
Mailing Address 3138 10th Street N

City State Zip Code
Arlington VA 22201-2160

FEC ID number of contributing federal political committee. **C C00040659**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11867

Amount of Each Receipt this Period
1000

C. National Cable & Telecommunications Assoc. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 25 Massachusetts Avenue NW
Suite 100

City State Zip Code
Washington DC 20001-1434

FEC ID number of contributing federal political committee. **C C00010082**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11880

Amount of Each Receipt this Period
1000

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 102 OF 166
	<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)
Tom Reed for Congress

A. National Fuel Gas
 Full Name (Last, First, Middle Initial)
 Mailing Address 6363 Main Street
 City State Zip Code
 Williamsville NY 14221-5855
 FEC ID number of contributing federal political committee. **C C00083758**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 3000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014
Transaction ID : A-CF11741
 Amount of Each Receipt this Period
 500

B. National Restaurant Association PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 17th Street NW
 City State Zip Code
 Washington DC 20036-3004
 FEC ID number of contributing federal political committee. **C C00003764**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 7500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014
Transaction ID : A-CF11738
 Amount of Each Receipt this Period
 2500

C. National Restaurant Association PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 17th Street NW
 City State Zip Code
 Washington DC 20036-3004
 FEC ID number of contributing federal political committee. **C C00003764**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 7500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014
Transaction ID : A-CF11739
 Amount of Each Receipt this Period
 2500

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

5500.00

**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 103 OF 166
	<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)
Tom Reed for Congress

A. New York Life Insurance PAC

Full Name (Last, First, Middle Initial)
New York Life Insurance PAC

Mailing Address 901 15th Street NW

City Washington State DC Zip Code 20005-2327

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000**

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

Transaction ID : A-CF11716

Amount of Each Receipt this Period
 4000

B. NFIB Safe Trust

Full Name (Last, First, Middle Initial)
NFIB Safe Trust

Mailing Address 1201 F Street NW
Suite 200

City Washington State DC Zip Code 20004-1221

FEC ID number of contributing federal political committee. **C C00101105**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF11870

Amount of Each Receipt this Period
 1500

C. NiSource Inc PAC

Full Name (Last, First, Middle Initial)
NiSource Inc PAC

Mailing Address 10 G Street NE
Suite 400

City Washington State DC Zip Code 20002-4277

FEC ID number of contributing federal political committee. **C C00051979**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF11895

Amount of Each Receipt this Period
 1000

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 104 OF 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Pat Meehan for Congress

Mailing Address 50 S Providence Road

City State Zip Code
Media PA 19063-3531

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 27 / 2014

Transaction ID : A-CF11634

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
Pharmaceutical Care Management Assoc. PAC

Mailing Address 601 Pennsylvania Avenue NW
Suite 740S

City State Zip Code
Washington DC 20004-2699

FEC ID number of contributing federal political committee. **C C00388819**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2014

Transaction ID : A-CF11698

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Real Estate Roundtable PAC

Mailing Address 801 Pennsylvania Avenue NW
Suite 720

City State Zip Code
Washington DC 20004-2686

FEC ID number of contributing federal political committee. **C C00033779**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : A-CF11559

Amount of Each Receipt this Period
1500

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 105 OF 166	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Real Estate Roundtable PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 801 Pennsylvania Avenue NW
 Suite 720
 City Washington State DC Zip Code 20004-2686
 FEC ID number of contributing federal political committee. **C C00033779**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
6000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014
Transaction ID : A-CF11560
 Amount of Each Receipt this Period
1000

B. Realtors PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 New Jersey Avenue NW
 City Washington State DC Zip Code 20001-2005
 FEC ID number of contributing federal political committee. **C C00030718**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014
Transaction ID : A-CF11428
 Amount of Each Receipt this Period
3000

C. Realtors PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 New Jersey Avenue NW
 City Washington State DC Zip Code 20001-2005
 FEC ID number of contributing federal political committee. **C C00030718**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014
Transaction ID : A-CF11429
 Amount of Each Receipt this Period
5000

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

9000.00

**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 166
	<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)
Tom Reed for Congress

A. Republican Main Street PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1220 L Street NW
Suite 100-263

City Washington State DC Zip Code 20005-4018

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
9000

Date of Receipt
 M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : A-CF11631

Amount of Each Receipt this Period
1000

B. Road To Freedom PAC

Full Name (Last, First, Middle Initial)
Mailing Address 228 S Washington Street
Suite 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C C00486043**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11885

Amount of Each Receipt this Period
1000

C. Rochester Higher Education And Research PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1100 Clinton Square

City Rochester State NY Zip Code 14604-1730

FEC ID number of contributing federal political committee. **C C00405340**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11675

Amount of Each Receipt this Period
1000

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 107 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Reed for Congress

A. Safari Club Int'l PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 4800 W Gates Pass Road
 City State Zip Code
 Tucson AZ 85745-9600
 FEC ID number of contributing federal political committee. **C C00122101**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 4000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2014
Transaction ID : A-CF11620
 Amount of Each Receipt this Period
 2000

B. Sempra Energy PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Ash Street
 City State Zip Code
 San Diego CA 92101-3017
 FEC ID number of contributing federal political committee. **C C00008748**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014
Transaction ID : A-CF11881
 Amount of Each Receipt this Period
 1000

C. Society Of Interventional Radiology PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 3975 Fair Ridge Drive
 Suite 400
 City State Zip Code
 Fairfax VA 22033-2911
 FEC ID number of contributing federal political committee. **C C00408435**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014
Transaction ID : A-CF11809
 Amount of Each Receipt this Period
 5000

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

8000.00

**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 166
	<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)
Tom Reed for Congress

A. Society Of Interventional Radiology PAC

Full Name (Last, First, Middle Initial)
Mailing Address 3975 Fair Ridge Drive
Suite 400

City State Zip Code
Fairfax VA 22033-2911

FEC ID number of contributing federal political committee. **C C00408435**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11810

Amount of Each Receipt this Period
5000

B. Technology Research & Innovation Federal PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1100 Clinton Square

City State Zip Code
Rochester NY 14604-1730

FEC ID number of contributing federal political committee. **C C00474122**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : A-CF11701

Amount of Each Receipt this Period
500

C. Thrivent Financial for Lutherans

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1892

City State Zip Code
Appleton WI 54912-1892

FEC ID number of contributing federal political committee. **C C00121319**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
M M / D D / Y Y Y Y
05 / 28 / 2014

Transaction ID : A-CF11656

Amount of Each Receipt this Period
5000

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

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

10500.00

**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 166
	<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)
Tom Reed for Congress

A. Tyco International Employees PAC

Full Name (Last, First, Middle Initial)
Mailing Address 607 14th Street NW
Suite 550

City Washington State DC Zip Code 20005-2014

FEC ID number of contributing federal political committee. **C C00113753**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 20 / 2014

Transaction ID : A-CF11606

Amount of Each Receipt this Period
1500

B. UBS Americas Inc PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1501 K Street NW
Suite 1100

City Washington State DC Zip Code 20005-1410

FEC ID number of contributing federal political committee. **C C00012245**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : A-CF11591

Amount of Each Receipt this Period
2500

C. UPSPAC

Full Name (Last, First, Middle Initial)
Mailing Address 316 Pennsylvania Avenue SE
Suite 300

City Washington State DC Zip Code 20003-1173

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9000

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : A-CF11430

Amount of Each Receipt this Period
500

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

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

4500.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
UPSPAC

Mailing Address 316 Pennsylvania Avenue SE
Suite 300

City Washington State DC Zip Code 20003-1173

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11893

Amount of Each Receipt this Period
500

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

Mailing Address 316 Pennsylvania Avenue SE
Suite 300

City Washington State DC Zip Code 20003-1173

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11894

Amount of Each Receipt this Period
4000

C. Full Name (Last, First, Middle Initial)
USbancorp PAC

Mailing Address 950 F Street NW
Suite 750

City Washington State DC Zip Code 20004-1438

FEC ID number of contributing federal political committee. **C C00320002**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF11869

Amount of Each Receipt this Period
1000

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

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

5500.00

**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 166
	<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)
Tom Reed for Congress

A. Full Name (Last, First, Middle Initial)
Wellpoint, Inc PAC

Mailing Address 120 Monument Circle

City Indianapolis State IN Zip Code 46204-4906

FEC ID number of contributing federal political committee. **C** C00197228

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000

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

Transaction ID : A-CF11724

Amount of Each Receipt this Period
1000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

171000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Alfie's Restaurant			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 986 Fairmount Avenue			Amount of Each Disbursement this Period 175 Transaction ID : B-E-11567
City Jamestown	State NY	Zip Code 14701-2449	
Purpose of Disbursement Fundraising: catering		Category/ Type 003	
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. Astorino For Governor			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address PO Box 1154			Amount of Each Disbursement this Period 250 Transaction ID : B-E-11570
City Pittsford	State NY	Zip Code 14534-9154	
Purpose of Disbursement Campaign Event: tickets		Category/ Type 007	
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. Bank Of America			Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 50 Rockefeller Plaza			Amount of Each Disbursement this Period 290 Transaction ID : B-E-11490
City New York	State NY	Zip Code 10020-1605	
Purpose of Disbursement Other: tickets		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).....	715.00
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 113 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Bellwether Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 1150 Hungryneck Boulevard Suite C-336		Amount of Each Disbursement this Period 11264.28 Transaction ID : B-E-11507
City Mount Pleasant State SC Zip Code 29464-3484	Purpose of Disbursement Fundraising: PAC fundraising Candidate Name Category/Type 003	
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. Bellwether Consulting		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 1150 Hungryneck Boulevard Suite C-336		Amount of Each Disbursement this Period 1126.39 Transaction ID : B-E-11815
City Mount Pleasant State SC Zip Code 29464-3484	Purpose of Disbursement Fundraising: PAC Fundraising Candidate Name Category/Type 003	
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. CCC Development Foundation		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address Attn:Keshia Davis 1 Academic Dr		Amount of Each Disbursement this Period 250 Transaction ID : B-E-11509
City Corning State NY Zip Code 14830-3297	Purpose of Disbursement sponsor fee Candidate Name Category/Type 001	
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).....	12640.67
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 114 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Country Club of Rochester		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2014
Mailing Address 2935 East Avenue		Amount of Each Disbursement this Period 216 Transaction ID : B-E-11481
City Rochester	State NY Zip Code 14610-3517	
Purpose of Disbursement Fundraising: catering	Category/Type 003	
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. Craft/Media/Digital		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1600 K Street NW Suite 300		Amount of Each Disbursement this Period 6500 Transaction ID : B-E-11511
City Washington	State DC Zip Code 20006-2836	
Purpose of Disbursement media consulting	Category/Type 001	
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. Craft/Media/Digital		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 1600 K Street NW Suite 300		Amount of Each Disbursement this Period 4500 Transaction ID : B-E-11574
City Washington	State DC Zip Code 20006-2836	
Purpose of Disbursement media consulting	Category/Type 001	
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).....	11216.00
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 115 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Democracy Engine		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 850 Quincy Street NW		Amount of Each Disbursement this Period 94.62 Transaction ID : B-E-11861
City Washington State DC Zip Code 20011-5867	Purpose of Disbursement CC Processing fee Candidate Name Category/Type 001	
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. Democracy Engine		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 850 Quincy Street NW		Amount of Each Disbursement this Period 48.92 Transaction ID : B-E-11862
City Washington State DC Zip Code 20011-5867	Purpose of Disbursement CC Processing fee Candidate Name Category/Type 001	
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. Democracy Engine		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 850 Quincy Street NW		Amount of Each Disbursement this Period 182.9 Transaction ID : B-E-11863
City Washington State DC Zip Code 20011-5867	Purpose of Disbursement CC Processing fee Candidate Name Category/Type 001	
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).....	326.44
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 116 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Direct Response Strategies		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 228 S Washington Street Suite B30		Amount of Each Disbursement this Period 1584.28 Transaction ID : B-E-11522
City Alexandria State VA Zip Code 22314-5409	Purpose of Disbursement Administrative/Salary/Overhead: postage 001 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. Direct Response Strategies		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 228 S Washington Street Suite B30		Amount of Each Disbursement this Period 4466.42 Transaction ID : B-E-11503
City Alexandria State VA Zip Code 22314-5409	Purpose of Disbursement Fundraising: Direct mail 003 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. First Rehab Life		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 600 Northern Boulevard		Amount of Each Disbursement this Period 122.4 Transaction ID : B-E-11499
City Great Neck State NY Zip Code 11021-5206	Purpose of Disbursement NY dbl insurance 001 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).....	6173.10
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 117 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Frontier Communications		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address PO Box 20550		Amount of Each Disbursement this Period 230.12 Transaction ID : B-E-11491
City Rochester	State NY Zip Code 14602-0550	
Purpose of Disbursement phone service	Category/Type 001	
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. Frontier Communications		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address PO Box 20550		Amount of Each Disbursement this Period 231.35 Transaction ID : B-E-11536
City Rochester	State NY Zip Code 14602-0550	
Purpose of Disbursement phone service	Category/Type 001	
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. Graphic Solutions		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 100 Village Square		Amount of Each Disbursement this Period 408 Transaction ID : B-E-11484
City Painted Post	State NY Zip Code 14870-1348	
Purpose of Disbursement Fundraising: banners	Category/Type 003	
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).....	869.47
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 118 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. i360, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 37046		Amount of Each Disbursement this Period 1500 Transaction ID : B-E-11519
City Baltimore State MD Zip Code 21297-3046	Purpose of Disbursement 6 month subscription Category/Type 001	
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. IRS		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 310 Lowell Street		Amount of Each Disbursement this Period 4046.15 Transaction ID : B-E-11852
City Andover State MA Zip Code 01810-5430	Purpose of Disbursement payroll tax Category/Type 001	
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. IRS		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 310 Lowell Street		Amount of Each Disbursement this Period 3985.62 Transaction ID : B-E-11853
City Andover State MA Zip Code 01810-5430	Purpose of Disbursement payroll tax Category/Type 001	
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).....	9531.77
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 119 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. IRS		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 310 Lowell Street		Amount of Each Disbursement this Period 237.61 Transaction ID : B-E-11866
City Andover	State MA	
Zip Code 01810-5430	Purpose of Disbursement Administrative/Salary/Overhead: tax	Category/ Type 001
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. IRS		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 310 Lowell Street		Amount of Each Disbursement this Period 3157.62 Transaction ID : B-E-11854
City Andover	State MA	
Zip Code 01810-5430	Purpose of Disbursement payroll tax	Category/ Type 001
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. IRS		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 310 Lowell Street		Amount of Each Disbursement this Period 3367.51 Transaction ID : B-E-11855
City Andover	State MA	
Zip Code 01810-5430	Purpose of Disbursement payroll tax	Category/ Type 001
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).....	6762.74
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 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. IRS		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 310 Lowell Street		Amount of Each Disbursement this Period 3392.32 Transaction ID : B-E-11856
City Andover State MA Zip Code 01810-5430	Purpose of Disbursement payroll tax Category/Type 001	
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. Lukens Company		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 2800 S Shirlington Road		Amount of Each Disbursement this Period 9310.89 Transaction ID : B-E-11502
City Arlington State VA Zip Code 22206-3601	Purpose of Disbursement printed material Category/Type 001	
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. M & T Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 5 E Market Street		Amount of Each Disbursement this Period 2.5 Transaction ID : B-E-11864
City Corning State NY Zip Code 14830-2642	Purpose of Disbursement service fee Category/Type 001	
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).....	12705.71
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 121 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. M & T Bank		Date of Disbursement MM / DD / YYYY 05 / 08 / 2014
Mailing Address 5 E Market Street		Amount of Each Disbursement this Period 12345678901234567890 2.5
City Corning	State NY	
Zip Code 14830-2642	Purpose of Disbursement service fee	Transaction ID : B-E-11865
Candidate Name	001 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. Mark Assini For Congress		Date of Disbursement MM / DD / YYYY 06 / 03 / 2014
Mailing Address 3363 Buffalo Road		Amount of Each Disbursement this Period 12345678901234567890 500
City Rochester	State NY	
Zip Code 14624-1117	Purpose of Disbursement Political Contribution: donation	Transaction ID : B-E-11796
Candidate Name	011 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. Monroe County Conservative Party		Date of Disbursement MM / DD / YYYY 04 / 29 / 2014
Mailing Address 24 Boyd Drive		Amount of Each Disbursement this Period 12345678901234567890 1290
City Rochester	State NY	
Zip Code 14616-4156	Purpose of Disbursement Advertising: advertising and dinner	Transaction ID : B-E-11480
Candidate Name	004 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).....	1792.50
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 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Multi Media Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 11136 River Road		Amount of Each Disbursement this Period 431.63 Transaction ID : B-E-11482
City Corning State NY Zip Code 14830-9324	Purpose of Disbursement Administrative/Salary/Overhead: Printing Category/Type 001	
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. National Coalition Against Domestic Violence		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1 Broadway Suite 210B		Amount of Each Disbursement this Period 1130 Transaction ID : B-E-11510
City Denver State CO Zip Code 80203-3983	Purpose of Disbursement Paraphernalia: Lapel pins Category/Type 006	
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. NY Department Of Revenue		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address PO Box 4127		Amount of Each Disbursement this Period 700.1 Transaction ID : B-E-11860
City Binghamton State NY Zip Code 13902-4127	Purpose of Disbursement Administrative/Salary/Overhead: tax Category/Type 001	
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).....	2261.73
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 123 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. NY Department Of Revenue		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address PO Box 4127		Amount of Each Disbursement this Period 1238.16 Transaction ID : B-E-11859
City Binghamton	State NY	
Zip Code 13902-4127	Purpose of Disbursement Administrative/Salary/Overhead: tax	Category/ Type 001
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. NY Department Of Revenue		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address PO Box 4127		Amount of Each Disbursement this Period 1188 Transaction ID : B-E-11858
City Binghamton	State NY	
Zip Code 13902-4127	Purpose of Disbursement Administrative/Salary/Overhead: tax	Category/ Type 001
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. NY Republican State Committee		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 122 E 83rd Street		Amount of Each Disbursement this Period 600 Transaction ID : B-E-11550
City New York	State NY	
Zip Code 10028-0838	Purpose of Disbursement Convention dinner	Category/ Type 001
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).....	3026.16
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 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. NY Republican State Committee			Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 315 State Street			Amount of Each Disbursement this Period 211.28 Transaction ID : B-E-11564
City Albany	State NY	Zip Code 12210-2001	
Purpose of Disbursement Other: Convention activities		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. NYS Employment Taxes			Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address PO Box 4119			Amount of Each Disbursement this Period 2388.09 Transaction ID : B-E-11857
City Binghamton	State NY	Zip Code 13902-4119	
Purpose of Disbursement Administrative/Salary/Overhead: tax		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. Patton Boggs			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2550 M Street NW			Amount of Each Disbursement this Period 1995 Transaction ID : B-E-11516
City Washington	State DC	Zip Code 20037-1309	
Purpose of Disbursement legal counsel		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).....	4594.37
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 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Phoenix Graphics		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 1525 Emerson Street		Amount of Each Disbursement this Period 1451.52 Transaction ID : B-E-11505
City Rochester	State NY Zip Code 14606-3117	
Purpose of Disbursement printed material	Category/Type 001	
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. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address Winton Rd		Amount of Each Disbursement this Period 245 Transaction ID : B-E-11501
City Rochester	State NY Zip Code 14610	
Purpose of Disbursement Administrative/Salary/Overhead: stamps	Category/Type 001	
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. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address Winton Rd		Amount of Each Disbursement this Period 122.5 Transaction ID : B-E-11496
City Rochester	State NY Zip Code 14610	
Purpose of Disbursement Administrative/Salary/Overhead: stamps	Category/Type 001	
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).....	1819.02
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 166		
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Postmaster		M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address Winton Rd		Amount of Each Disbursement this Period
City Rochester	State NY	Zip Code 14610
Purpose of Disbursement box rental	Category/Type 001	128
Candidate Name	Transaction ID : B-E-11493	
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)		Date of Disbursement
B. Postmaster		M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address Winton Rd		Amount of Each Disbursement this Period
City Rochester	State NY	Zip Code 14610
Purpose of Disbursement Administrative/Salary/Overhead: postage	Category/Type 001	735
Candidate Name	Transaction ID : B-E-11597	
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)		Date of Disbursement
C. Postmaster		M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address Winton Rd		Amount of Each Disbursement this Period
City Rochester	State NY	Zip Code 14610
Purpose of Disbursement Administrative/Salary/Overhead: postage	Category/Type 001	563
Candidate Name	Transaction ID : B-E-11617	
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).....	1426.00
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 127 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Red Print Strategy		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2014
Mailing Address 311 S Fillmore Street		Amount of Each Disbursement this Period 6000
City Arlington	State VA	Zip Code 22204-2080
Purpose of Disbursement Advertising: Web Video Production	Category/Type 004	
Candidate Name		Transaction ID : B-E-11498
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. RG & E		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address PO Box 11747		Amount of Each Disbursement this Period 40.26
City Newark	State NJ	Zip Code 07101-4747
Purpose of Disbursement utilities	Category/Type 001	
Candidate Name		Transaction ID : B-E-11492
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. RG & E		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address PO Box 11747		Amount of Each Disbursement this Period 53.21
City Newark	State NJ	Zip Code 07101-4747
Purpose of Disbursement Administrative/Salary/Overhead: Utilities	Category/Type 001	
Candidate Name		Transaction ID : B-E-11598
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)	6093.47
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 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Roland-Kelly Inc		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 689 S Collier Boulevard		Amount of Each Disbursement this Period 11500 Transaction ID : B-E-11512
City Marco Island	State FL	
Zip Code 34145-5601	Purpose of Disbursement political strategic consultant	Category/ Type 001
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. Roland-Kelly Inc		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 689 S Collier Boulevard		Amount of Each Disbursement this Period 15113.5 Transaction ID : B-E-11485
City Marco Island	State FL	
Zip Code 34145-5601	Purpose of Disbursement political strategic consultant	Category/ Type 001
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. Roland-Kelly Inc		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 689 S Collier Boulevard		Amount of Each Disbursement this Period 13731 Transaction ID : B-E-11618
City Marco Island	State FL	
Zip Code 34145-5601	Purpose of Disbursement Political Strategic Consulting	Category/ Type 003
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).....	40344.50
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 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Royal Court Restaurant		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 529 S Meadow Street		Amount of Each Disbursement this Period 210 Transaction ID : B-E-11494
City Ithaca State NY Zip Code 14850-5316	Purpose of Disbursement Fundraising: catering Candidate Name Category/Type 003	
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. RR Resource Recovery		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 88 Tioga Avenue Suite 201		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-11520
City Corning State NY Zip Code 14830-2858	Purpose of Disbursement Administrative/Salary/Overhead: rent Candidate Name Category/Type 001	
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. RR Resource Recovery		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 88 Tioga Avenue Suite 201		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-11535
City Corning State NY Zip Code 14830-2858	Purpose of Disbursement Administrative/Salary/Overhead: rent Candidate Name Category/Type 001	
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).....	2210.00
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 130 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Staffing & Payroll Solutions, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address Carol Parks 6550 Hughes Road		Amount of Each Disbursement this Period 49.82 Transaction ID : B-E-11487
City Canisteo	State NY Zip Code 14823-9746	
Purpose of Disbursement March processing fees	Category/Type 001	
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. The Tarrance Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 201 N Union Street Suite 410		Amount of Each Disbursement this Period 14939 Transaction ID : B-E-11486
City Alexandria	State VA Zip Code 22314-2649	
Purpose of Disbursement Survey research	Category/Type 001	
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. Time Warner Cable - Corning		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 70872		Amount of Each Disbursement this Period 114.69 Transaction ID : B-E-11514
City Charlotte	State NC Zip Code 28272-0872	
Purpose of Disbursement phone & internet service	Category/Type 001	
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).....	15103.51
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 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Time Warner Cable - Corning		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address PO Box 70872		Amount of Each Disbursement this Period 114.68 Transaction ID : B-E-11538
City Charlotte	State NC	
Zip Code 28272-0872	Purpose of Disbursement phone & internet	Category/ Type 001
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. Time Warner Cable-Roc		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 2086		Amount of Each Disbursement this Period 93.95 Transaction ID : B-E-11515
City Binghamton	State NY	
Zip Code 13902-2086	Purpose of Disbursement internet service	Category/ Type 001
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. Time Warner Cable-Roc		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address PO Box 2086		Amount of Each Disbursement this Period 93.95 Transaction ID : B-E-11537
City Binghamton	State NY	
Zip Code 13902-2086	Purpose of Disbursement internet service	Category/ Type 001
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).....	302.58
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 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Travelers CL Remittance Center			Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014	
Mailing Address PO Box 6603217			Amount of Each Disbursement this Period 390	
City Dallas	State TX	Zip Code 75266	Transaction ID : B-E-11615	
Purpose of Disbursement workers comp ins		Category/ Type 001		
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. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014	
Mailing Address 3048 NYS Route 417			Amount of Each Disbursement this Period 256.09	
City Olean	State NY	Zip Code 14760-1833	Transaction ID : B-E-11513	
Purpose of Disbursement phone service		Category/ Type 001		
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. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 3048 NYS Route 417			Amount of Each Disbursement this Period 241.26	
City Olean	State NY	Zip Code 14760-1833	Transaction ID : B-E-11489	
Purpose of Disbursement phone service		Category/ Type 001		
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).....	887.35
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 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Visa Cardmember Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 11610.6
City Saint Louis	State MO	
Zip Code 63179-0408	Purpose of Disbursement Administrative/Salary/Overhead: se below	Transaction ID : B-E-11551
Candidate Name	001 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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) B. Westin Houston Downtown		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1520 Texas Street		Amount of Each Disbursement this Period 1273
City Houston	State TX	
Zip Code 77002	Purpose of Disbursement lodging	Transaction ID : B-S-333
Candidate Name	003 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)	[MEMO ITEM] Subitemization of Visa Cardmember Service(04/01/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Wegmans Food Market		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 11620 Monument Drive		Amount of Each Disbursement this Period 643.6
City Fairfax	State VA	
Zip Code 22030-8706	Purpose of Disbursement catering	Transaction ID : B-S-348
Candidate Name	003 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)	[MEMO ITEM] Subitemization of Visa Cardmember Service(04/01/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11610.60
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 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 250
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement catering	Transaction ID : B-S-335
Candidate Name	Category/Type 003	
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] Subitemization of Visa Cardmember Service(04/01/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Geppetto Catering		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 4505 Queensbury Road		Amount of Each Disbursement this Period 414.5
City Riverdale Park	State MD	
Zip Code 20737-1033	Purpose of Disbursement catering	Transaction ID : B-S-341
Candidate Name	Category/Type 003	
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] Subitemization of Visa Cardmember Service(04/01/14)
State: District:		

Full Name (Last, First, Middle Initial) C. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 324
City Atlanta	State GA	
Zip Code 30354-1989	Purpose of Disbursement travel	Transaction ID : B-S-336
Candidate Name	Category/Type 003	
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] Subitemization of Visa Cardmember Service(04/01/14)
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 135 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Grand Hyatt Hotel		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 109 E 42nd Street		Amount of Each Disbursement this Period 222.67
City New York	State NY	
Zip Code 10017-8500	Purpose of Disbursement lodging	Transaction ID : B-S-350
Candidate Name	003 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)	[MEMO ITEM] Subitemization of Visa Cardmember Service(04/01/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Grand Hyatt Hotel		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 109 E 42nd Street		Amount of Each Disbursement this Period 222.67
City New York	State NY	
Zip Code 10017-8500	Purpose of Disbursement lodging	Transaction ID : B-S-334
Candidate Name	003 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)	[MEMO ITEM] Subitemization of Visa Cardmember Service(04/01/14)
State: District:		

Full Name (Last, First, Middle Initial) c. USAirways		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 4000 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 1162.5
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement travel	Transaction ID : B-S-332
Candidate Name	003 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)	[MEMO ITEM] Subitemization of Visa Cardmember Service(04/01/14)
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 136 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial)
A. Staples

Mailing Address 821 County Route 64

City Big Flats State NY Zip Code 14814

Purpose of Disbursement office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 208.33

Transaction ID : B-S-345

[MEMO ITEM]
Subitemization of Visa Cardmember Service(04/01/14)

Full Name (Last, First, Middle Initial)
B. Wal-Mart

Mailing Address 3217 Silverback Lane

City Painted Post State NY Zip Code 14870-8911

Purpose of Disbursement office

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 1167.16

Transaction ID : B-S-346

[MEMO ITEM]
Subitemization of Visa Cardmember Service(04/01/14)

Full Name (Last, First, Middle Initial)
c. Multi Media Services

Mailing Address 11136 River Road

City Corning State NY Zip Code 14830-9324

Purpose of Disbursement printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 1293.27

Transaction ID : B-S-344

[MEMO ITEM]
Subitemization of Visa Cardmember Service(04/01/14)

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 137 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Amtrak.com		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 50 Massachusetts Avenue NE		Amount of Each Disbursement this Period 518
City Washington State DC Zip Code 20002-4214	Purpose of Disbursement travel 003 Category/Type	
Candidate Name		Transaction ID : B-S-338 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/01/14)
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. US Airways		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address Rochester International Airport		Amount of Each Disbursement this Period 256
City Rochester State NY Zip Code 14624	Purpose of Disbursement travel 003 Category/Type	
Candidate Name		Transaction ID : B-S-337 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/01/14)
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. Bobby Van's Steakhouse		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 809 15th Street NW		Amount of Each Disbursement this Period 1564.58
City Washington State DC Zip Code 20005-2203	Purpose of Disbursement catering 003 Category/Type	
Candidate Name		Transaction ID : B-S-343 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/01/14)
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).....	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 138 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Capital Grille		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 601 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 230
City Washington State DC Zip Code 20004-2601	Purpose of Disbursement catering	
Candidate Name	Category/Type 003	Transaction ID : B-S-349 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/01/14)
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. Windows Catering		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 5724 General Washington Dr		Amount of Each Disbursement this Period 2284.04
City Alexandria State VA Zip Code 22312	Purpose of Disbursement catering	
Candidate Name	Category/Type 003	Transaction ID : B-S-339 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/01/14)
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. Mo's a Place for Steak		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1801 Post Oak Boulevard Suite 1E		Amount of Each Disbursement this Period 2206.2
City Houston State TX Zip Code 77056-3800	Purpose of Disbursement catering	
Candidate Name	Category/Type 003	Transaction ID : B-S-340 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/01/14)
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).....	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 139 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Equinox Restaurant		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 818 Connecticut Ave NW		Amount of Each Disbursement this Period 21744.74
City Washington State DC Zip Code 20006	Purpose of Disbursement catering	
Candidate Name	Category/Type 003	Transaction ID : B-S-342
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:		[MEMO ITEM] Subitemization of Visa Cardmember Service(04/01/14)

Full Name (Last, First, Middle Initial) B. Canon USA Direct		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address One Canon Park		Amount of Each Disbursement this Period 653.39
City Melville State NY Zip Code 11747	Purpose of Disbursement office equipment	
Candidate Name	Category/Type 001	Transaction ID : B-S-347
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:		[MEMO ITEM] Subitemization of Visa Cardmember Service(04/01/14)

Full Name (Last, First, Middle Initial) c. Visa Cardmember Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 21744.74
City Saint Louis State MO Zip Code 63179-0408	Purpose of Disbursement see below	
Candidate Name	Category/Type 001	Transaction ID : B-E-11552
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:		Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional).....	21744.74
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 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 243.32
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement catering 003 Category/Type	
Candidate Name		Transaction ID : B-S-353 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)
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. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 363.1
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement catering 003 Category/Type	
Candidate Name		Transaction ID : B-S-354 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)
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. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 263
City Atlanta State GA Zip Code 30354-1989	Purpose of Disbursement travel 003 Category/Type	
Candidate Name		Transaction ID : B-S-351 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)
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).....	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 141 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 2735 W State Street		Amount of Each Disbursement this Period 344.81
City Olean State NY Zip Code 14760-1826	Purpose of Disbursement office equipment 001 Category/Type	
Candidate Name		Transaction ID : B-S-366 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)
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 Gaffer Grille and Tap Room		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 58 W Market Street		Amount of Each Disbursement this Period 211.21
City Corning State NY Zip Code 14830-2527	Purpose of Disbursement catering 003 Category/Type	
Candidate Name		Transaction ID : B-S-363 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)
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. Graphic Solutions		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 100 Village Square		Amount of Each Disbursement this Period 341
City Painted Post State NY Zip Code 14870-1348	Purpose of Disbursement signs 001 Category/Type	
Candidate Name		Transaction ID : B-S-364 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)
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).....	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 142 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Westin Hotel		Date of Disbursement MM / DD / YYYY 04 / 22 / 2014
Mailing Address 2100 Massachusetts Avenue NW		Amount of Each Disbursement this Period 309.89
City Washington State DC Zip Code 20008-2807	Purpose of Disbursement lodging 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-352 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Westin Hotel		Date of Disbursement MM / DD / YYYY 04 / 22 / 2014
Mailing Address 2100 Massachusetts Avenue NW		Amount of Each Disbursement this Period 309.89
City Washington State DC Zip Code 20008-2807	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-367 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement MM / DD / YYYY 04 / 22 / 2014
Mailing Address 821 County Route 64		Amount of Each Disbursement this Period 210.5
City Big Flats State NY Zip Code 14814	Purpose of Disbursement office supplies 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-362 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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 143 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 821 County Route 64		Amount of Each Disbursement this Period 382.33
City Big Flats	State NY	Zip Code 14814
Purpose of Disbursement office supplies	Category/Type 001	
Candidate Name	Disbursement For: 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Transaction ID : B-S-358	
[MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)		

Full Name (Last, First, Middle Initial) B. Sonoma Restaurant & Wine Bar		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 223 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 665
City Washington	State DC	Zip Code 20003-1107
Purpose of Disbursement catering	Category/Type 003	
Candidate Name	Disbursement For: 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Transaction ID : B-S-357	
[MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)		

Full Name (Last, First, Middle Initial) c. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 1585 Niagara Falls Boulevard		Amount of Each Disbursement this Period 1023.96
City Buffalo	State NY	Zip Code 14228-2704
Purpose of Disbursement office equipment	Category/Type 004	
Candidate Name	Disbursement For: 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Transaction ID : B-S-369	
[MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)		

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 144 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Tournedos Restaurant		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 26 Broadway		Amount of Each Disbursement this Period 3933.36
City Rochester	State NY Zip Code 14607-1704	
Purpose of Disbursement catering	Category/Type 003	Transaction ID : B-S-361 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)
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. Simplicity		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 6402 Arlington Boulevard		Amount of Each Disbursement this Period 336.44
City Falls Church	State VA Zip Code 22042-2356	
Purpose of Disbursement catering	Category/Type 003	Transaction ID : B-S-356 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)
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. Westin Grand Central		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 212 E 42nd Street		Amount of Each Disbursement this Period 309.89
City New York	State NY Zip Code 10017-5803	
Purpose of Disbursement lodging	Category/Type 003	Transaction ID : B-S-368 [MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)
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).....	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 145 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Tickets Washington Nationals		Date of Disbursement MM / DD / YYYY 04 / 22 / 2014
Mailing Address Nationals Park 1500 Capitol St SE		Amount of Each Disbursement this Period 4320
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising event tickets	Transaction ID : B-S-360
Candidate Name	Category/ Type 003	
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] Subitemization of Visa Cardmember Service(04/22/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Wegmans		Date of Disbursement MM / DD / YYYY 04 / 22 / 2014
Mailing Address 24 S Bridge Street		Amount of Each Disbursement this Period 903.59
City Corning	State NY	
Zip Code 14830-2257	Purpose of Disbursement catering	Transaction ID : B-S-365
Candidate Name	Category/ Type 003	
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] Subitemization of Visa Cardmember Service(04/22/14)
State: District:		

Full Name (Last, First, Middle Initial) C. Central Michel Richard		Date of Disbursement MM / DD / YYYY 04 / 22 / 2014
Mailing Address 1001 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 2600
City Washington	State DC	
Zip Code 20004-2505	Purpose of Disbursement catering	Transaction ID : B-S-355
Candidate Name	Category/ Type 003	
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] Subitemization of Visa Cardmember Service(04/22/14)
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 146 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Acqua A1 2		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 212 7th Street SE		Amount of Each Disbursement this Period 1650
City Washington State DC Zip Code 20003-4311	Purpose of Disbursement catering	
Candidate Name	Category/Type 003	Transaction ID : B-S-359
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:		[MEMO ITEM] Subitemization of Visa Cardmember Service(04/22/14)

Full Name (Last, First, Middle Initial) B. Visa Cardmember Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 10000
City Saint Louis State MO Zip Code 63179-0408	Purpose of Disbursement see below	
Candidate Name	Category/Type 001	Transaction ID : B-E-11797
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:		Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 390.71
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement catering	
Candidate Name	Category/Type 003	Transaction ID : B-S-375
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:		[MEMO ITEM] Subitemization of Visa Cardmember Service(05/23/14)

SUBTOTAL of Disbursements This Page (optional).....	10000.00
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 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 1929.26
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement catering	
Candidate Name	Category/Type 003	Transaction ID : B-S-377 [MEMO ITEM] Subitemization of Visa Cardmember Service(05/23/14)
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. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 323
City Atlanta State GA Zip Code 30354-1989	Purpose of Disbursement travel	
Candidate Name	Category/Type 003	Transaction ID : B-S-371 [MEMO ITEM] Subitemization of Visa Cardmember Service(05/23/14)
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. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 605
City Atlanta State GA Zip Code 30354-1989	Purpose of Disbursement travel	
Candidate Name	Category/Type 003	Transaction ID : B-S-373 [MEMO ITEM] Subitemization of Visa Cardmember Service(05/23/14)
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).....	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 148 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Ramada Inn		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 41 Lake Front Drive		Amount of Each Disbursement this Period 444.55
City Geneva	State NY	Zip Code 14456-3400
Purpose of Disbursement lodging	Category/Type 001	
Candidate Name	Transaction ID : B-S-382	
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] Subitemization of Visa Cardmember Service(05/23/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Radisson Hotel Corning		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 125 Denison Parkway E		Amount of Each Disbursement this Period 650.16
City Corning	State NY	Zip Code 14830-2704
Purpose of Disbursement catering	Category/Type 003	
Candidate Name	Transaction ID : B-S-383	
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] Subitemization of Visa Cardmember Service(05/23/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Jet Blue Airlines		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address PO Box 17435		Amount of Each Disbursement this Period 265
City Salt Lake City	State UT	Zip Code 84117-0435
Purpose of Disbursement travel	Category/Type 003	
Candidate Name	Transaction ID : B-S-374	
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] Subitemization of Visa Cardmember Service(05/23/14)
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 149 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 77 W Wacker Drive		Amount of Each Disbursement this Period 370
City Chicago	State IL Zip Code 60601-1604	
Purpose of Disbursement travel	Category/Type 003	Transaction ID : B-S-372 [MEMO ITEM] Subitemization of Visa Cardmember Service(05/23/14)
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. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 77 W Wacker Drive		Amount of Each Disbursement this Period 430
City Chicago	State IL Zip Code 60601-1604	
Purpose of Disbursement travel	Category/Type 003	Transaction ID : B-S-376 [MEMO ITEM] Subitemization of Visa Cardmember Service(05/23/14)
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. Newseum		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 555 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 227.76
City Washington	State DC Zip Code 20001-2114	
Purpose of Disbursement fundraising event tickets	Category/Type 003	Transaction ID : B-S-379 [MEMO ITEM] Subitemization of Visa Cardmember Service(05/23/14)
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).....	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 150 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Hilton Hotel		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 1335 Avenue Of The Americas		Amount of Each Disbursement this Period 771.65
City New York	State NY	
Zip Code 10019-6012	Purpose of Disbursement lodging	Transaction ID : B-S-380
Candidate Name	002 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)	[MEMO ITEM] Subitemization of Visa Cardmember Service(05/23/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Hilton Hotel		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 1335 Avenue Of The Americas		Amount of Each Disbursement this Period 771.65
City New York	State NY	
Zip Code 10019-6012	Purpose of Disbursement lodging	Transaction ID : B-S-381
Candidate Name	002 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)	[MEMO ITEM] Subitemization of Visa Cardmember Service(05/23/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Aristotle International Inc.		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 2100
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement service contract fee	Transaction ID : B-S-378
Candidate Name	001 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)	[MEMO ITEM] Subitemization of Visa Cardmember Service(05/23/14)
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 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Pamela F Baker		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 500 Allens Creek Road		Amount of Each Disbursement this Period 2170.2 Transaction ID : B-E-11832
City Rochester State NY Zip Code 14618-3406	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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. Pamela F Baker		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2014
Mailing Address 500 Allens Creek Road		Amount of Each Disbursement this Period 487.24 Transaction ID : B-E-11497
City Rochester State NY Zip Code 14618-3406	Purpose of Disbursement reimbursement-no itemization needed Candidate Name Category/Type 001	
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. Pamela F Baker		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 500 Allens Creek Road		Amount of Each Disbursement this Period 2170.21 Transaction ID : B-E-11833
City Rochester State NY Zip Code 14618-3406	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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).....	4827.65
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 152 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Pamela F Baker		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 500 Allens Creek Road		Amount of Each Disbursement this Period 2170.2 Transaction ID : B-E-11834
City Rochester State NY Zip Code 14618-3406	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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. Pamela F Baker		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 500 Allens Creek Road		Amount of Each Disbursement this Period 196.03 Transaction ID : B-E-11571
City Rochester State NY Zip Code 14618-3406	Purpose of Disbursement reimbursement-no itemization needed Candidate Name Category/Type 001	
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. Pamela F Baker		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 500 Allens Creek Road		Amount of Each Disbursement this Period 600 Transaction ID : B-E-11575
City Rochester State NY Zip Code 14618-3406	Purpose of Disbursement reimbursement- no itemization needed Candidate Name Category/Type 001	
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).....	2966.23
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 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Pamela F Baker		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 500 Allens Creek Road		Amount of Each Disbursement this Period 2170.21 Transaction ID : B-E-11835
City Rochester	State NY Zip Code 14618-3406	
Purpose of Disbursement Administrative/Salary/Overhead: payroll		Category/Type 001
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. Pamela F Baker		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 500 Allens Creek Road		Amount of Each Disbursement this Period 2170.2 Transaction ID : B-E-11836
City Rochester	State NY Zip Code 14618-3406	
Purpose of Disbursement Administrative/Salary/Overhead: payroll		Category/Type 001
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. Christine R Burke		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 16605		Amount of Each Disbursement this Period 599.39 Transaction ID : B-E-11827
City Rochester	State NY Zip Code 14616-0605	
Purpose of Disbursement Administrative/Salary/Overhead: payroll		Category/Type 001
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).....	4939.80
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 154 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Christine R Burke		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address PO Box 16605		Amount of Each Disbursement this Period 599.4 Transaction ID : B-E-11828
City Rochester State NY Zip Code 14616-0605	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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. Christine R Burke		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address PO Box 16605		Amount of Each Disbursement this Period 599.4 Transaction ID : B-E-11831
City Rochester State NY Zip Code 14616-0605	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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. Christine R Burke		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address PO Box 16605		Amount of Each Disbursement this Period 599.39 Transaction ID : B-E-11829
City Rochester State NY Zip Code 14616-0605	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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).....	1798.19
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 155 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Christine R Burke		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address PO Box 16605		Amount of Each Disbursement this Period 599.4 Transaction ID : B-E-11830
City Rochester	State NY	
Zip Code 14616-0605	Purpose of Disbursement Administrative/Salary/Overhead: payroll	Category/ Type 001
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. James Tsu-Yao Hung		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 28 Goodman St		Amount of Each Disbursement this Period 500 Transaction ID : B-E-11521
City Rochester	State NY	
Zip Code 14607	Purpose of Disbursement Administrative/Salary/Overhead: rent	Category/ Type 001
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. James Tsu-Yao Hung		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 28 Goodman St		Amount of Each Disbursement this Period 500 Transaction ID : B-E-11534
City Rochester	State NY	
Zip Code 14607	Purpose of Disbursement Administrative/Salary/Overhead: rent	Category/ Type 001
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).....	1599.40
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 156 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Steven Pfrang		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 3129 8th Street N		Amount of Each Disbursement this Period 2043.5 Transaction ID : B-E-11837
City Arlington	State VA	
Zip Code 22201-2020	Purpose of Disbursement Administrative/Salary/Overhead: payroll	Category/ Type 001
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. Steven Pfrang		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 3129 8th Street N		Amount of Each Disbursement this Period 2043.51 Transaction ID : B-E-11838
City Arlington	State VA	
Zip Code 22201-2020	Purpose of Disbursement Administrative/Salary/Overhead: payroll	Category/ Type 001
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. Steven Pfrang		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 3129 8th Street N		Amount of Each Disbursement this Period 721.57 Transaction ID : B-E-11839
City Arlington	State VA	
Zip Code 22201-2020	Purpose of Disbursement Administrative/Salary/Overhead: payroll	Category/ Type 001
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).....	4808.58
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 157 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Steven Pfrang		Date of Disbursement MM / DD / YYYY 05 / 16 / 2014
Mailing Address 3129 8th Street N		Amount of Each Disbursement this Period 1124.65 Transaction ID : B-E-11840
City Arlington	State VA	
Zip Code 22201-2020	Purpose of Disbursement Administrative/Salary/Overhead: payroll	Category/ Type 001
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. Steven Pfrang		Date of Disbursement MM / DD / YYYY 06 / 01 / 2014
Mailing Address 3129 8th Street N		Amount of Each Disbursement this Period 1124.66 Transaction ID : B-E-11841
City Arlington	State VA	
Zip Code 22201-2020	Purpose of Disbursement Administrative/Salary/Overhead: payroll	Category/ Type 001
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. Katherine R Pudwill		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 138 Cedar Street Apt. 201		Amount of Each Disbursement this Period 1204.06 Transaction ID : B-E-11847
City Corning	State NY	
Zip Code 14830-2624	Purpose of Disbursement Administrative/Salary/Overhead: payroll	Category/ Type 001
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)	3453.37
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 158 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Katherine R Pudwill		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 138 Cedar Street Apt. 201		Amount of Each Disbursement this Period 707.14 Transaction ID : B-E-11506
City Corning State NY Zip Code 14830-2624	Purpose of Disbursement reimbursement-no itemization needed 001 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. Katherine R Pudwill		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 138 Cedar Street Apt. 201		Amount of Each Disbursement this Period 1204.07 Transaction ID : B-E-11848
City Corning State NY Zip Code 14830-2624	Purpose of Disbursement Administrative/Salary/Overhead: payroll 001 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. Katherine R Pudwill		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 138 Cedar Street Apt. 201		Amount of Each Disbursement this Period 1204.06 Transaction ID : B-E-11849
City Corning State NY Zip Code 14830-2624	Purpose of Disbursement Administrative/Salary/Overhead: payroll 001 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).....	3115.27
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 159 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Katherine R Pudwill		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 138 Cedar Street Apt. 201		Amount of Each Disbursement this Period 320.67 Transaction ID : B-E-11572
City Corning State NY Zip Code 14830-2624	Purpose of Disbursement reimbursement/mileage 001 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. Katherine R Pudwill		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 138 Cedar Street Apt. 201		Amount of Each Disbursement this Period 1204.07 Transaction ID : B-E-11850
City Corning State NY Zip Code 14830-2624	Purpose of Disbursement Administrative/Salary/Overhead: payroll 001 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. Katherine R Pudwill		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 138 Cedar Street Apt. 201		Amount of Each Disbursement this Period 1204.06 Transaction ID : B-E-11851
City Corning State NY Zip Code 14830-2624	Purpose of Disbursement Administrative/Salary/Overhead: payroll 001 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).....	2728.80
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 160 OF 166	
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Cory L Tylenda		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 4953 S Main Street		Amount of Each Disbursement this Period 233.52 Transaction ID : B-E-11818
City North Rose State NY Zip Code 14516-9701	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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. Cory L Tylenda		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 4953 S Main Street		Amount of Each Disbursement this Period 137.37 Transaction ID : B-E-11504
City North Rose State NY Zip Code 14516-9701	Purpose of Disbursement Fundraising: photographer Candidate Name Category/Type 003	
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. Cory L Tylenda		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 4953 S Main Street		Amount of Each Disbursement this Period 38.48 Transaction ID : B-E-11819
City North Rose State NY Zip Code 14516-9701	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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).....	409.37
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 161 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Cory L Tylenda			Date of Disbursement MM / DD / YYYY 05 / 16 / 2014
Mailing Address 4953 S Main Street			Amount of Each Disbursement this Period 1.74 Transaction ID : B-E-11820
City North Rose	State NY	Zip Code 14516-9701	
Purpose of Disbursement Administrative/Salary/Overhead: payroll		Category/ Type 001	
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. Cory L Tylenda			Date of Disbursement MM / DD / YYYY 06 / 01 / 2014
Mailing Address 4953 S Main Street			Amount of Each Disbursement this Period 100.13 Transaction ID : B-E-11821
City North Rose	State NY	Zip Code 14516-9701	
Purpose of Disbursement Administrative/Salary/Overhead: payroll		Category/ Type 001	
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. James E Walsh Esq.			Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 20 Church Avenue			Amount of Each Disbursement this Period 1500 Transaction ID : B-E-11508
City Ballston Spa	State NY	Zip Code 12020-1956	
Purpose of Disbursement attorney fee		Category/ Type 001	
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)	1601.87
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 162 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Nick Weinstein		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 186 Chestnut Street Apt. 201		Amount of Each Disbursement this Period 972.66 Transaction ID : B-E-11822
City Corning State NY Zip Code 14830-2532	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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. Nick Weinstein		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 186 Chestnut Street Apt. 201		Amount of Each Disbursement this Period 972.66 Transaction ID : B-E-11823
City Corning State NY Zip Code 14830-2532	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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. Nick Weinstein		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 186 Chestnut Street Apt. 201		Amount of Each Disbursement this Period 1567.36 Transaction ID : B-E-11495
City Corning State NY Zip Code 14830-2532	Purpose of Disbursement reimbursement-no itemization needed Candidate Name Category/Type 001	
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).....	3512.66
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 163 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Nick Weinstein		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 186 Chestnut Street Apt. 201		Amount of Each Disbursement this Period 972.66 Transaction ID : B-E-11824
City Corning State NY Zip Code 14830-2532	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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. Nick Weinstein		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 186 Chestnut Street Apt. 201		Amount of Each Disbursement this Period 972.65 Transaction ID : B-E-11825
City Corning State NY Zip Code 14830-2532	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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. Nick Weinstein		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 186 Chestnut Street Apt. 201		Amount of Each Disbursement this Period 972.66 Transaction ID : B-E-11826
City Corning State NY Zip Code 14830-2532	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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).....	2917.97
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 164 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Seth Wimer		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 101 W 1st Street # 201		Amount of Each Disbursement this Period 2020.82 Transaction ID : B-E-11842
City Corning State NY Zip Code 14830-2501	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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. Seth Wimer		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 101 W 1st Street # 201		Amount of Each Disbursement this Period 843.71 Transaction ID : B-E-11500
City Corning State NY Zip Code 14830-2501	Purpose of Disbursement reimbursement-no itemization needed Candidate Name Category/Type 001	
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. Seth Wimer		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 101 W 1st Street # 201		Amount of Each Disbursement this Period 2020.82 Transaction ID : B-E-11843
City Corning State NY Zip Code 14830-2501	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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).....	4885.35
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 165 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Seth Wimer		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 101 W 1st Street # 201		Amount of Each Disbursement this Period 2020.82 Transaction ID : B-E-11844
City Corning State NY Zip Code 14830-2501	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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. Seth Wimer		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 101 W 1st Street # 201		Amount of Each Disbursement this Period 2020.82 Transaction ID : B-E-11845
City Corning State NY Zip Code 14830-2501	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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. Seth Wimer		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 101 W 1st Street # 201		Amount of Each Disbursement this Period 2020.82 Transaction ID : B-E-11846
City Corning State NY Zip Code 14830-2501	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
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).....	6062.46
TOTAL This Period (last page this line number only).....	233784.42

**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 166 OF 166			
	<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)
Tom Reed for Congress

Full Name (Last, First, Middle Initial) A. Mr. Kraig Kayser		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 122 Terrace Drive		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-11817
City Lake Geneva	State WI	
Zip Code 53147-5033		Category/ Type 010
Purpose of Disbursement Refund of overpayment		
Candidate Name		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

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

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

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00