

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Aramark Services, Inc. PAC (Aramark PAC)

ADDRESS (number and street) 1101 Market Street
Check if different than previously reported. (ACC) Philadelphia PA 19107

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00157677 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 02 / 01 / 2017 through 06 / 30 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Reynolds, Stephen, R. , ,
Type or Print Name of Treasurer

Signature of Treasurer Reynolds, Stephen, R. , , [Electronically Filed] Date 07 / 31 / 2017

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Aramark Services, Inc. PAC (Aramark PAC)

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2017"/> | | 86663.27 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 87271.56 | |
| (c) Total Receipts (from Line 19) | 2778.50 | 3415.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 90050.06 | 90078.27 |
| 7. Total Disbursements (from Line 31)..... | 6040.09 | 6068.30 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 84009.97 | 84009.97 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 05/2016)

Write or Type Committee Name

Aramark Services, Inc. PAC (Aramark PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
02 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2017

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 640.00 | 1276.50 |
| (ii) Unitemized | 2138.50 | 2138.50 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 2778.50 | 3415.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 2778.50 | 3415.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 2778.50 | 3415.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 2778.50 | 3415.00 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 140.09 | 168.30 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 140.09 | 168.30 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 4000.00 | 4000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 1900.00 | 1900.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 6040.09 | 6068.30 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 6040.09 | 6068.30 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 2778.50 | 3415.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 2778.50 | 3415.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 140.09 | 168.30 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 140.09 | 168.30 |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 19 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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)
Aramark Services, Inc. PAC (Aramark PAC)

A. Crompton, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 Westminster Ave
 City Haddonfield State NJ Zip Code 08033-4019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARAMARK Occupation (for Individual) EXECUTIVE VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2017
Transaction ID : CC94E13C6B3D463D9E9D
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Crompton, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 Westminster Ave
 City Haddonfield State NJ Zip Code 08033-4019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARAMARK Occupation (for Individual) EXECUTIVE VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017
Transaction ID : B8B9CFB356EB403D88E4
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Crompton, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 Westminster Ave
 City Haddonfield State NJ Zip Code 08033-4019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARAMARK Occupation (for Individual) EXECUTIVE VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : 7EEF9D50A95A4862A96D
 Amount of Each Receipt this Period
 25.00
 Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 75.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 7 OF 19 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Aramark Services, Inc. PAC (Aramark PAC)

A. Crompton, Gary, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 450 Westminster Ave

| | | |
|---------------------|-------------|------------------------|
| City Haddonfield | State NJ | Zip Code 08033-4019 |
|---------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) EXECUTIVE VICE PRESIDENT |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 13 | | 2017 |

Transaction ID : B2F72761759E4549965A

Amount of Each Receipt this Period
25.00

Memo Item

B. Crompton, Gary, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 450 Westminster Ave

| | | |
|---------------------|-------------|------------------------|
| City Haddonfield | State NJ | Zip Code 08033-4019 |
|---------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) EXECUTIVE VICE PRESIDENT |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 27 | | 2017 |

Transaction ID : 82EBA70D07934114936B

Amount of Each Receipt this Period
25.00

Memo Item

C. HINDS, JAMES A, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39W894 LOUISA MAY

| | | |
|---------------------|-------------|-------------------|
| City ST. CHARLES | State IL | Zip Code 60175 |
|---------------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) REGIONAL VICE PRESIDENT |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 02 | | 2017 |

Transaction ID : 8051469D2D774BA6AB9B

Amount of Each Receipt this Period
25.00

Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 75.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 8 OF 19 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Aramark Services, Inc. PAC (Aramark PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HINDS, JAMES A, , ,

Mailing Address 39W894 LOUISA MAY

| | | |
|---------------------|-------------|-------------------|
| City ST. CHARLES | State IL | Zip Code 60175 |
|---------------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) REGIONAL VICE PRESIDENT |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 16 | / | 2017 |

Transaction ID : E49DAB98672148D6AD00

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HINDS, JAMES A, , ,

Mailing Address 39W894 LOUISA MAY

| | | |
|---------------------|-------------|-------------------|
| City ST. CHARLES | State IL | Zip Code 60175 |
|---------------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) REGIONAL VICE PRESIDENT |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 31 | / | 2017 |

Transaction ID : DE77555EDF8644BBA209

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HINDS, JAMES A, , ,

Mailing Address 39W894 LOUISA MAY

| | | |
|---------------------|-------------|-------------------|
| City ST. CHARLES | State IL | Zip Code 60175 |
|---------------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) REGIONAL VICE PRESIDENT |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 13 | / | 2017 |

Transaction ID : 383F06009FBE40BE8EEA

Amount of Each Receipt this Period
25.00

Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 75.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 9 OF 19 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Aramark Services, Inc. PAC (Aramark PAC)

A. HINDS, JAMES A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39W894 LOUISA MAY
 City ST. CHARLES State IL Zip Code 60175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARAMARK Occupation (for Individual) REGIONAL VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 27 / 2017
Transaction ID : 7578FA022D50419E840A
 Amount of Each Receipt this Period 25.00
 Memo Item

B. O'BRIEN, DENISE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 Katie Dr
 City Langhorne State PA Zip Code 19047-2335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARAMARK Occupation (for Individual) VP, BUS. DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 04 / 04 / 2017
Transaction ID : 43603A0741ED43EFBD55
 Amount of Each Receipt this Period 15.00
 Memo Item

C. O'BRIEN, DENISE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 Katie Dr
 City Langhorne State PA Zip Code 19047-2335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARAMARK Occupation (for Individual) VP, BUS. DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 04 / 11 / 2017
Transaction ID : 0E522CC8CD324221A637
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 19 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Aramark Services, Inc. PAC (Aramark PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'BRIEN, DENISE M, , ,

Mailing Address 67 Katie Dr

| | | |
|-------------------|-------------|------------------------|
| City Langhorne | State PA | Zip Code 19047-2335 |
|-------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) VP, BUS. DEVELOPMENT |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 18 | | 2017 |

Transaction ID : DF33B197C9F245B99D50

Amount of Each Receipt this Period
15.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'BRIEN, DENISE M, , ,

Mailing Address 67 Katie Dr

| | | |
|-------------------|-------------|------------------------|
| City Langhorne | State PA | Zip Code 19047-2335 |
|-------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) VP, BUS. DEVELOPMENT |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 25 | | 2017 |

Transaction ID : 065DFA9C0CCF482890F6

Amount of Each Receipt this Period
15.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'BRIEN, DENISE M, , ,

Mailing Address 67 Katie Dr

| | | |
|-------------------|-------------|------------------------|
| City Langhorne | State PA | Zip Code 19047-2335 |
|-------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) VP, BUS. DEVELOPMENT |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 02 | | 2017 |

Transaction ID : 3B7563A49D9F471494BE

Amount of Each Receipt this Period
15.00

Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 45.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 OF 19 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
Aramark Services, Inc. PAC (Aramark PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'BRIEN, DENISE M, , ,

Mailing Address 67 Katie Dr

| | | |
|-------------------|-------------|------------------------|
| City Langhorne | State PA | Zip Code 19047-2335 |
|-------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) VP, BUS. DEVELOPMENT |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2017

Transaction ID : A0828015934149FDBBCB

Amount of Each Receipt this Period
15.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'BRIEN, DENISE M, , ,

Mailing Address 67 Katie Dr

| | | |
|-------------------|-------------|------------------------|
| City Langhorne | State PA | Zip Code 19047-2335 |
|-------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) VP, BUS. DEVELOPMENT |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2017

Transaction ID : BF77A78E02E24C88B447

Amount of Each Receipt this Period
15.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'BRIEN, DENISE M, , ,

Mailing Address 67 Katie Dr

| | | |
|-------------------|-------------|------------------------|
| City Langhorne | State PA | Zip Code 19047-2335 |
|-------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) VP, BUS. DEVELOPMENT |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2017

Transaction ID : AD9FE94BDDD94C7B9CD8

Amount of Each Receipt this Period
15.00

Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 45.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 19 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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)
Aramark Services, Inc. PAC (Aramark PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'BRIEN, DENISE M, , ,

Mailing Address 67 Katie Dr

| | | |
|-------------------|-------------|------------------------|
| City Langhorne | State PA | Zip Code 19047-2335 |
|-------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) VP, BUS. DEVELOPMENT |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017

Transaction ID : 1DC3305C29F4460E9B76

Amount of Each Receipt this Period
15.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'BRIEN, DENISE M, , ,

Mailing Address 67 Katie Dr

| | | |
|-------------------|-------------|------------------------|
| City Langhorne | State PA | Zip Code 19047-2335 |
|-------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) VP, BUS. DEVELOPMENT |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2017

Transaction ID : 0F2E5BEB38904D72AF55

Amount of Each Receipt this Period
15.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'BRIEN, DENISE M, , ,

Mailing Address 67 Katie Dr

| | | |
|-------------------|-------------|------------------------|
| City Langhorne | State PA | Zip Code 19047-2335 |
|-------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) VP, BUS. DEVELOPMENT |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2017

Transaction ID : 4D32890DB18249DB947C

Amount of Each Receipt this Period
15.00

Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 45.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 OF 19 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Aramark Services, Inc. PAC (Aramark PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'BRIEN, DENISE M, , ,

Mailing Address 67 Katie Dr

| | | |
|-------------------|-------------|------------------------|
| City Langhorne | State PA | Zip Code 19047-2335 |
|-------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) VP, BUS. DEVELOPMENT |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 20 | / | 2017 |

Transaction ID : 822CC270F4F347BA946C

Amount of Each Receipt this Period
15.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'BRIEN, DENISE M, , ,

Mailing Address 67 Katie Dr

| | | |
|-------------------|-------------|------------------------|
| City Langhorne | State PA | Zip Code 19047-2335 |
|-------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) VP, BUS. DEVELOPMENT |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 27 | / | 2017 |

Transaction ID : 032E46C34AA948E68AF5

Amount of Each Receipt this Period
15.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ROPER, RICHARD, , ,

Mailing Address 2 Towne Hill Rd

| | | |
|------------------|-------------|------------------------|
| City Bradford | State MA | Zip Code 01835-8279 |
|------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) REGIONAL VICE PRESIDENT |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 04 | / | 2017 |

Transaction ID : 5F5BC614F889495EBDDC

Amount of Each Receipt this Period
15.00

Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 45.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 19 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Aramark Services, Inc. PAC (Aramark PAC)

A. ROPER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 Towne Hill Rd

| | | |
|------------------|-------------|------------------------|
| City Bradford | State MA | Zip Code 01835-8279 |
|------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) REGIONAL VICE PRESIDENT |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 11 | / | 2017 |

Transaction ID : B90D5684B05742F88803

Amount of Each Receipt this Period
15.00

Memo Item

B. ROPER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 Towne Hill Rd

| | | |
|------------------|-------------|------------------------|
| City Bradford | State MA | Zip Code 01835-8279 |
|------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) REGIONAL VICE PRESIDENT |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 18 | / | 2017 |

Transaction ID : 8AE25505914348CEB183

Amount of Each Receipt this Period
15.00

Memo Item

C. ROPER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 Towne Hill Rd

| | | |
|------------------|-------------|------------------------|
| City Bradford | State MA | Zip Code 01835-8279 |
|------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) REGIONAL VICE PRESIDENT |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 25 | / | 2017 |

Transaction ID : 5CE7DE969517480FABD3

Amount of Each Receipt this Period
15.00

Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 45.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 15 OF 19 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Aramark Services, Inc. PAC (Aramark PAC)

A. ROPER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 Towne Hill Rd

| | | |
|------------------|-------------|------------------------|
| City Bradford | State MA | Zip Code 01835-8279 |
|------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) REGIONAL VICE PRESIDENT |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 02 | | 2017 |

Transaction ID : 86376B189D7A4B2A9CDF

Amount of Each Receipt this Period
15.00

Memo Item

B. ROPER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 Towne Hill Rd

| | | |
|------------------|-------------|------------------------|
| City Bradford | State MA | Zip Code 01835-8279 |
|------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) REGIONAL VICE PRESIDENT |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 09 | | 2017 |

Transaction ID : 158898B4EF5145AF9F8F

Amount of Each Receipt this Period
15.00

Memo Item

C. ROPER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 Towne Hill Rd

| | | |
|------------------|-------------|------------------------|
| City Bradford | State MA | Zip Code 01835-8279 |
|------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) REGIONAL VICE PRESIDENT |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 16 | | 2017 |

Transaction ID : 0E55DB5F3AF8435D857F

Amount of Each Receipt this Period
15.00

Memo Item

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 45.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 16 OF 19 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Aramark Services, Inc. PAC (Aramark PAC)

A. ROPER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 Towne Hill Rd

| | | |
|------------------|-------------|------------------------|
| City Bradford | State MA | Zip Code 01835-8279 |
|------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) REGIONAL VICE PRESIDENT |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 23 | | 2017 |

Transaction ID : 97AA741EAEC44428806F

Amount of Each Receipt this Period
15.00

Memo Item

B. ROPER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 Towne Hill Rd

| | | |
|------------------|-------------|------------------------|
| City Bradford | State MA | Zip Code 01835-8279 |
|------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) REGIONAL VICE PRESIDENT |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 31 | | 2017 |

Transaction ID : D0B18DD77E144F459A28

Amount of Each Receipt this Period
15.00

Memo Item

C. ROPER, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 Towne Hill Rd

| | | |
|------------------|-------------|------------------------|
| City Bradford | State MA | Zip Code 01835-8279 |
|------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) ARAMARK | Occupation (for Individual) REGIONAL VICE PRESIDENT |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 06 | | 2017 |

Transaction ID : 694CA74769EE4C33A05F

Amount of Each Receipt this Period
15.00

Memo Item

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 45.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 19 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Aramark Services, Inc. PAC (Aramark PAC)

A. ROPER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 Towne Hill Rd
 City Bradford State MA Zip Code 01835-8279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARAMARK Occupation (for Individual) REGIONAL VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 13 / 2017
Transaction ID : 123A0E4551C64361B3E9
 Amount of Each Receipt this Period 15.00
 Memo Item

B. ROPER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 Towne Hill Rd
 City Bradford State MA Zip Code 01835-8279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARAMARK Occupation (for Individual) REGIONAL VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 20 / 2017
Transaction ID : DC5239DE6E604843B728
 Amount of Each Receipt this Period 15.00
 Memo Item

C. ROPER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 Towne Hill Rd
 City Bradford State MA Zip Code 01835-8279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARAMARK Occupation (for Individual) REGIONAL VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 27 / 2017
Transaction ID : D11B0B7735AF429A9FB2
 Amount of Each Receipt this Period 15.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 45.00 |
| TOTAL This Period (last page this line number only)..... | 640.00 |

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Aramark Services, Inc. PAC (Aramark PAC)

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Bob Casey For Senate Inc | | Date of Disbursement MM / DD / YYYY 05 / 05 / 2017 |
| Mailing Address PO Box 58746 | | FEC Identification Number C00431056 Transaction ID : AC1BE8E823 |
| City Philadelphia | State PA | Zip Code 19102 |
| Purpose of Disbursement 2018 Primary | | 011 Category/Type |
| Candidate Name Casey, Robert, P., , Jr | | Amount of Each Disbursement this Period 500.00 |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: PA | District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. McClintock For Congress | | Date of Disbursement MM / DD / YYYY 06 / 26 / 2017 |
| Mailing Address 2150 River Plaza Dr. #150 | | FEC Identification Number C00446815 Transaction ID : DB4CA45E5D |
| City Sacramento | State CA | Zip Code 95833 |
| Purpose of Disbursement 2018 Primary | | 011 Category/Type |
| Candidate Name McClintock, Thomas, M., , | | Amount of Each Disbursement this Period 1000.00 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: CA | District: 04 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Textile Rental Services Association Of America Political Action Committee (TRSAPAC) | | Date of Disbursement MM / DD / YYYY 03 / 27 / 2017 |
| Mailing Address 1800 Diagonal Road Suite 200 | | FEC Identification Number C00279828 Transaction ID : 9156F072FB; |
| City Alexandria | State VA | Zip Code 22314 |
| Purpose of Disbursement 2017 Contribution | | 011 Category/Type |
| Candidate Name Textile Rental Services Association Of America Political Action Committee (TRSAPAC) | | Amount of Each Disbursement this Period 2500.00 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution | <input type="checkbox"/> Memo Item |
| State: | District: | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 4000.00 |
| TOTAL This Period (last page this line number only).....▶ | 4000.00 |

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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)
Aramark Services, Inc. PAC (Aramark PAC)

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. ChamberPHL PAC | | Date of Disbursement MM / DD / YYYY 03 / 27 / 2017 |
| Mailing Address 200 South Broad Street Suite 700 | | FEC Identification Number C [REDACTED] Transaction ID : 9B59999B23C Amount of Each Disbursement this Period 1250.00 |
| City Philadelphia | State PA | Zip Code 19102 |
| Purpose of Disbursement Nonfederal Contribution | | Category/Type 011 |
| Candidate Name | | Memo Item <input type="checkbox"/> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Elect Bill Mullen Sheriff | | Date of Disbursement MM / DD / YYYY 04 / 05 / 2017 |
| Mailing Address 470 Streets Run Road | | FEC Identification Number C [REDACTED] Transaction ID : 5F96E2F812F Amount of Each Disbursement this Period 500.00 |
| City Pittsburgh | State PA | Zip Code 15236 |
| Purpose of Disbursement Nonfederal Contribution | | Category/Type 011 |
| Candidate Name | | Memo Item <input type="checkbox"/> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Sheriff Stammitti | | Date of Disbursement MM / DD / YYYY 05 / 30 / 2017 |
| Mailing Address 7564 Heritage Way | | FEC Identification Number C [REDACTED] Transaction ID : 21D2AE6E8E Amount of Each Disbursement this Period 150.00 |
| City Amherst | State OH | Zip Code 44001 |
| Purpose of Disbursement Nonfederal Contribution | | Category/Type 011 |
| Candidate Name | | Memo Item <input type="checkbox"/> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 1900.00 |
| TOTAL This Period (last page this line number only).....▶ | 1900.00 |