

# 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

Committee To Elect Kerith Strano Taylor To Congress

ADDRESS (number and street)

P.O. Box 280

Check if different than previously reported. (ACC)

Brookville

PA

15825

2. FEC IDENTIFICATION NUMBER ▼

C C00555458

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

PA

05

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / 11

D D / 04

Y Y Y Y / 2014

in the State of

PA

5. Covering Period

M M / 10

D D / 16

Y Y Y Y / 2014

through

M M / 11

D D / 24

Y Y Y Y / 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 Joshua S. Bishop

Signature of Treasurer Joshua S. Bishop

[Electronically Filed]

Date

M M / 12

D D / 03

Y Y Y Y / 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.

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Committee To Elect Kerith Strano Taylor To 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))....	20492.41	144391.91
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	20492.41	144391.91
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	53907.90	154961.73
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	53907.90	154961.73
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5337.61	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	20000.00	

**For further information contact:**

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Committee To Elect Kerith Strano Taylor To Congress

Report Covering the Period: From: 10 / 16 / 2014 To: 11 / 24 / 2014

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 04 / 2014 (date of general election)	COLUMN C Total for 11 / 05 / 2014 (date after general election)  through 11 / 24 / 2014 (last day of reporting period)
<b>11. CONTRIBUTIONS</b> (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
10555.00	84294.61	0.00
(ii) Unitemized		
8561.50	42068.11	250.00
(iii) Total of contributions from individuals		
19116.50	126362.72	250.00
(b) Political Party Committees		
1200.00	3155.00	0.00
(c) Other Political Committees		
50.00	7850.00	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
125.91	7024.19	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
20492.41	144391.91	250.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	20000.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	20000.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
20492.41	164391.91	250.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

Committee To Elect Kerith Strano Taylor To Congress

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

**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
<input type="text" value="53907.90"/>	<input type="text" value="154961.73"/>	<input type="text" value="4142.57"/>
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 55

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	0.00	0.00
------	------	------

**21. OTHER DISBURSEMENTS**

0.00	200.00	0.00
------	--------	------

**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

53907.90	155161.73	4142.57
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

20492.41	144391.91	250.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

53907.90	154961.73	4142.57
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	38753.10
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	20492.41
25. SUBTOTAL (add Line 23 and Line 24).....	59245.51
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	53907.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	5337.61

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 55
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address 7 Rose St.

City State Zip Code  
Brookville PA 15825

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

Name of Employer Occupation  
Self-Employed Real Estate Investor

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 17 / 2014**

**Transaction ID : SA11AI.6002**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 223 Elm St.

City State Zip Code  
State College PA 16801

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

Name of Employer Occupation  
Self-employed Audiologist

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 28 / 2014**

**Transaction ID : SA11AI.6158**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 425 Windmere Dr.  
Apt. 3A

City State Zip Code  
State College PA 16801

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 16 / 2014**

**Transaction ID : SA11AI.5980**

Amount of Each Receipt this Period  
**500.00**

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

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

**800.00**

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

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

FOR LINE NUMBER: PAGE 8 OF 55  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address 1427 S. Pugh St.

City State Zip Code  
State College PA 16801

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

Name of Employer Occupation  
Penn State University Professor

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 17 / 2014

**Transaction ID : SA11AI.6026**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 500 E. Marylyn Ave.  
Apt. J155

City State Zip Code  
State College PA 16801

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

Name of Employer Occupation  
Self-employed Realtor

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 22 / 2014

**Transaction ID : SA11AI.6075**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1 W. Water St.

City State Zip Code  
Lock Haven PA 17745

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

Name of Employer Occupation  
Lock Haven University Professor

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 24 / 2014

**Transaction ID : SA11AI.6123**

Amount of Each Receipt this Period  
250.00

**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 9 OF 55
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address PO Box 517

City State Zip Code  
Zelienople PA 16063

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

Name of Employer Occupation  
Berner International Corp. President/CEO

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 31 / 2014

**Transaction ID : SA11AI.6252**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 715 W. Park Ave.

City State Zip Code  
State College PA 16803

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

Name of Employer Occupation  
Penn State University Professor

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 01 / 2014

**Transaction ID : SA11AI.6255**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 630 Fairmont Ave.

City State Zip Code  
State College PA 16801

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 29 / 2014

**Transaction ID : SA11AI.6178**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 55
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address 106 Sumar Rd.

City St. Marys State PA Zip Code 15857

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

Name of Employer University of Pittsburgh Occupation Adjunct Professor

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11AI.6224**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 1178 E. Liberty St.

City Clarion State PA Zip Code 16214

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 24 / 2014

**Transaction ID : SA11AI.6111**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 1178 E. Liberty St.

City Clarion State PA Zip Code 16214

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11AI.6213**

Amount of Each Receipt this Period  
**100.00**

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

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

**450.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 55
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address 425 Windmere Dr.  
Apt. 2B

City State Zip Code  
State College PA 16801

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 16 / 2014

**Transaction ID : SA11AI.5987**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2443 Hickory Hill Dr.

City State Zip Code  
State College PA 16803

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

Name of Employer Occupation  
n/a Retired

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
736.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 29 / 2014

**Transaction ID : SA11AI.6171**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 27 Holly Cir.

City State Zip Code  
State College PA 16801

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

Name of Employer Occupation  
Self-employed Demographer

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 22 / 2014

**Transaction ID : SA11AI.6095**

Amount of Each Receipt this Period  
100.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 55
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address 1003 Shirk Hollow Rd.

City Lock Haven State PA Zip Code 17745

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 31 / 2014**

**Transaction ID : SA11AI.6227**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 500 E. Marylyn Ave.  
Apt. L135

City State College State PA Zip Code 16801

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **373.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 17 / 2014**

**Transaction ID : SA11AI.6022**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 107 Redwood Ln

City State College State PA Zip Code 16801

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 28 / 2014**

**Transaction ID : SA11AI.6159**

Amount of Each Receipt this Period  
**100.00**

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

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

**300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 55
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address PO Box 192

City Boalsburg State PA Zip Code 16827

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 28 / 2014

**Transaction ID : SA11AI.6161**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 210 Hartswick Ave.

City State College State PA Zip Code 16803

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

Name of Employer Penn State University Occupation Professor

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 22 / 2014

**Transaction ID : SA11AI.6074**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 3291 Shellers Bnd Unit 752

City State College State PA Zip Code 16801

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 21 / 2014

**Transaction ID : SA11AI.6060**

Amount of Each Receipt this Period  
**25.00**

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

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

**325.00**

**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 55
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address 131 Blackberry Ln

City Boalsburg State PA Zip Code 16827

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2014**

**Transaction ID : SA11AI.6174**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 347 Main St.

City Brookville State PA Zip Code 15825

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 28 / 2014**

**Transaction ID : SA11AI.6163**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 290 Treetops Dr.

City State College State PA Zip Code 16801

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

Name of Employer None Occupation Unemployed

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 30 / 2014**

**Transaction ID : SA11AI.6218**

Amount of Each Receipt this Period  
**250.00**

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

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

**450.00**

**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 55
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address 316 Main St.

City State Zip Code  
Brookville PA 15825

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

Name of Employer Occupation  
Miller Welding Welder

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
3225.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 01 / 2014

**Transaction ID : SA11AI.6386**

Amount of Each Receipt this Period  
200.00  
In-kind - Rent for campaign staff (partial month)

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

Mailing Address 143 E. Curtin St.

City State Zip Code  
Bellefonte PA 16823

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 30 / 2014

**Transaction ID : SA11AI.6206**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 102 6th St.

City State Zip Code  
Youngsville PA 16371

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 28 / 2014

**Transaction ID : SA11AI.6164**

Amount of Each Receipt this Period  
50.00

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

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

450.00

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

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

FOR LINE NUMBER: PAGE 16 OF 55  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address 822 Harold Dr.

City Pennsylvania State PA Zip Code 16865

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

Name of Employer Penn State University Occupation Professor

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 31 / 2014**

**Transaction ID : SA11AI.6243**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 101 Brown Rd.

City Kersey State PA Zip Code 15846

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **925.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 21 / 2014**

**Transaction ID : SA11AI.6059**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 77 S. Seventh Ave

City Clarion State PA Zip Code 16214

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 30 / 2014**

**Transaction ID : SA11AI.6212**

Amount of Each Receipt this Period  
**100.00**

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

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

**500.00**

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

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

FOR LINE NUMBER: PAGE 17 OF 55  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address 1216 Heberton St.

City Pittsburgh State PA Zip Code 15206

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

Name of Employer Self-employed Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **475.04**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 29 / 2014**

**Transaction ID : SA11AI.6170**

Amount of Each Receipt this Period  
**180.00**

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

Mailing Address 778 Beaver Branch Rd.

City Pennsylvania Furnace State PA Zip Code 16865

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

Name of Employer None Occupation Unemployed

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 22 / 2014**

**Transaction ID : SA11AI.6093**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address PO Box 232

City Boalsburg State PA Zip Code 16827

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

Name of Employer Penn State University Occupation Research Technician

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 25 / 2014**

**Transaction ID : SA11AI.6141**

Amount of Each Receipt this Period  
**250.00**

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

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

**680.00**

**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 55
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address 27 Niagara Pier

City Erie State PA Zip Code 16507

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 17 / 2014

**Transaction ID : SA11AI.6041**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1647 N. Cherry Hill Rd.

City State College State PA Zip Code 16803

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

Name of Employer Penn State University Occupation Professor

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 21 / 2014

**Transaction ID : SA11AI.6050**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1647 N. Cherry Hill Rd.

City State College State PA Zip Code 16803

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

Name of Employer Penn State University Occupation Professor

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 29 / 2014

**Transaction ID : SA11AI.6169**

Amount of Each Receipt this Period  
250.00

**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 19 OF 55
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address 486 Bush Ct.

City State Zip Code  
Dubois PA 15801

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 22 / 2014

**Transaction ID : SA11AI.6085**

Amount of Each Receipt this Period  
400.00

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

Mailing Address 767 Beaver Branch Rd.

City State Zip Code  
Pennsylvania Furnace PA 16865

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 16 / 2014

**Transaction ID : SA11AI.5984**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 209 Limestone Dr.

City State Zip Code  
Bellefonte PA 16823

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 16 / 2014

**Transaction ID : SA11AI.5996**

Amount of Each Receipt this Period  
100.00

**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: PAGE 20 OF 55  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address 111 Grandview Ave.

City State Zip Code  
Pittsburgh PA 15211

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

Name of Employer Occupation  
Equipment & Controls Africa President

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
1850.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 31 / 2014

**Transaction ID : SA11AI.6228**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 215 N. 4th St.

City State Zip Code  
Reynoldsville PA 15851

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 17 / 2014

**Transaction ID : SA11AI.6025**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Joanne Tosti-Vasey**

Mailing Address PO Box 68

City State Zip Code  
Bellefonte PA 16823

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

Name of Employer Occupation  
Self-employed Community Activist

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 30 / 2014

**Transaction ID : SA11AI.6226**

Amount of Each Receipt this Period  
25.00

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

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

775.00

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

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

FOR LINE NUMBER: PAGE 21 OF 55  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Committee To Elect Kerith Strano Taylor To Congress**

**A.** Full Name (Last, First, Middle Initial)  
**H. Dean Tuttle**

Mailing Address 500 E. Marylyn Ave.  
Apt. B20

City State Zip Code  
State College PA 16801

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
260.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 17 / 2014

**Transaction ID : SA11AI.6033**

Amount of Each Receipt this Period  
60.00

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

Mailing Address 230 W. Main St.

City State Zip Code  
Boalsburg PA 16801

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

Name of Employer Occupation  
Self-employed Sales

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 22 / 2014

**Transaction ID : SA11AI.6101**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1023 Torrey Ln.

City State Zip Code  
Boalsburg PA 16827

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

Name of Employer Occupation  
Self-employed Business consultant

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 21 / 2014

**Transaction ID : SA11AI.6058**

Amount of Each Receipt this Period  
100.00

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

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

410.00

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

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

FOR LINE NUMBER: PAGE 22 OF 55  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Committee To Elect Kerith Strano Taylor To Congress**

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

Mailing Address 500 E. Marylyn Ave.

City State Zip Code  
State College PA 16801

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date  
240.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 24 / 2014

**Transaction ID : SA11AI.6129**

Amount of Each Receipt this Period  
40.00

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

Mailing Address 133 Sandy Ridge Rd.

City State Zip Code  
State College PA 16803

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

Name of Employer Occupation  
Self-employed Educator

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date  
575.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 22 / 2014

**Transaction ID : SA11AI.6089**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 133 Sandy Ridge Rd.

City State Zip Code  
State College PA 16803

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

Name of Employer Occupation  
Self-employed Educator

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date  
675.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 25 / 2014

**Transaction ID : SA11AI.6140**

Amount of Each Receipt this Period  
100.00

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

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

390.00

**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 55
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Betsy Whitman</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 133 Sandy Ridge Rd.		<b>Transaction ID : SA11AI.6254</b>	
City State Zip Code State College PA 16803	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period _____ 725.00		
Name of Employer Occupation Self-employed Educator	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date _____ 725.00			

Full Name (Last, First, Middle Initial) <b>B. Susan Youtz</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2014	
Mailing Address 3296 Shellers Bend Unit 147		<b>Transaction ID : SA11AI.6186</b>	
City State Zip Code State College PA 16801	Amount of Each Receipt this Period _____ 125.00		
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period _____ 275.00		
Name of Employer Occupation Retired Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date _____ 275.00			

Full Name (Last, First, Middle Initial) <b>C. Laurel Zydney</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 866 Walnut Spring Ln.		<b>Transaction ID : SA11AI.6244</b>	
City State Zip Code State College PA 16801	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period _____ 450.00		
Name of Employer Occupation n/a Homemaker	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date _____ 450.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 275.00
<b>TOTAL</b> This Period (last page this line number only).....	_____ 10555.00

**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 55
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Clarion County Democratic Committee**

Mailing Address 96 S. 7th Ave.

City	State	Zip Code
Clarion	PA	16214

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

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11B.6211**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Elk County Democratic Committee**

Mailing Address PO Box 335

City	State	Zip Code
St. Marys	PA	15857

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

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2014

**Transaction ID : SA11B.6198**

Amount of Each Receipt this Period  
200.00

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

Mailing Address

City	State	Zip Code

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

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D 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).....

1200.00

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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 25 OF 55

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NAME OF COMMITTEE (In Full)  
**Committee To Elect Kerith Strano Taylor To Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Friends of Brian McGrath**

Mailing Address 4008 Commodore Dr.

City Erie State PA Zip Code 16505

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 M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2014

**Transaction ID : SA11C.6233**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D 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 M / D 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).....

50.00

50.00

**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 55
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Committee To Elect Kerith Strano Taylor To Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kerith Strano Taylor**

Mailing Address 340 Main Street

City Brookville State PA Zip Code 15825

FEC ID number of contributing federal political committee. **C H4PA05062**

Name of Employer Taylor Law Firm Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**29415.17**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 17 / 2014

**Transaction ID : SA11D.6380**

Amount of Each Receipt this Period  
**26.39**

In-kind - meal (Say Sushi, State College)

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

Mailing Address 340 Main Street

City Brookville State PA Zip Code 15825

FEC ID number of contributing federal political committee. **C H4PA05062**

Name of Employer Taylor Law Firm Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**29465.69**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 20 / 2014

**Transaction ID : SA11D.6381**

Amount of Each Receipt this Period  
**50.52**

In-kind - Gasoline (Quick Stop, State College)

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

Mailing Address 340 Main Street

City Brookville State PA Zip Code 15825

FEC ID number of contributing federal political committee. **C H4PA05062**

Name of Employer Taylor Law Firm Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**29514.69**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 01 / 2014

**Transaction ID : SA11D.6384**

Amount of Each Receipt this Period  
**49.00**

In-kind - Web hosting (Nationbuilder)

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

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

**125.91**

**125.91**

**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 27 OF 55	
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Agovino</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 17 / 2014</b>
Mailing Address <b>388 Twin Lane South</b>		Amount of Each Disbursement this Period <b>500.00</b> <b>Transaction ID : SB17.6265</b>
City <b>Wantaugh</b> State <b>NY</b> Zip Code <b>11793</b>	Purpose of Disbursement <b>Salary</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Joseph Agovino</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 27 / 2014</b>
Mailing Address <b>388 Twin Lane South</b>		Amount of Each Disbursement this Period <b>500.00</b> <b>Transaction ID : SB17.6282</b>
City <b>Wantaugh</b> State <b>NY</b> Zip Code <b>11793</b>	Purpose of Disbursement <b>Salary</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Joseph Agovino</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2014</b>
Mailing Address <b>388 Twin Lane South</b>		Amount of Each Disbursement this Period <b>500.00</b> <b>Transaction ID : SB17.6289</b>
City <b>Wantaugh</b> State <b>NY</b> Zip Code <b>11793</b>	Purpose of Disbursement <b>Salary</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 55	
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Agovino</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2014</b>	
Mailing Address <b>388 Twin Lane South</b>			Amount of Each Disbursement this Period <b>358.68</b>	
City <b>Wantaugh</b>	State <b>NY</b>	Zip Code <b>11793</b>	Transaction ID : <b>SB17.6295</b>	
Purpose of Disbursement Reimbursements for gas		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Joseph Agovino</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2014</b>	
Mailing Address <b>388 Twin Lane South</b>			Amount of Each Disbursement this Period <b>277.96</b>	
City <b>Wantaugh</b>	State <b>NY</b>	Zip Code <b>11793</b>	Transaction ID : <b>SB17.6296</b>	
Purpose of Disbursement Reimbursements for food		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Joseph Agovino</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2014</b>	
Mailing Address <b>388 Twin Lane South</b>			Amount of Each Disbursement this Period <b>138.22</b>	
City <b>Wantaugh</b>	State <b>NY</b>	Zip Code <b>11793</b>	Transaction ID : <b>SB17.6297</b>	
Purpose of Disbursement Reimbursement for office supplies		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>774.86</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Agovino</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 388 Twin Lane South		Amount of Each Disbursement this Period 152.58 <b>Transaction ID : SB17.6298</b>
City Wantaugh	State NY	
Zip Code 11793	Purpose of Disbursement Reimbursement for hotel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Joseph Agovino</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 388 Twin Lane South		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.6325</b>
City Wantaugh	State NY	
Zip Code 11793	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. All Union Signs</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 2307 Berryhill St.		Amount of Each Disbursement this Period 3898.15 <b>Transaction ID : SB17.6279</b>
City Harrisburg	State PA	
Zip Code 17104	Purpose of Disbursement Printing cards and buttons	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4550.73
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Seth Barron</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 313 W. 19th St. Apt. 2		Amount of Each Disbursement this Period 300.00
City New York City	State NY	
Zip Code 10011	Purpose of Disbursement Campaign consulting	Transaction ID : SB17.6273
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michael Barry</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 6803 Rte. 11		Amount of Each Disbursement this Period 400.00
City Tully	State NY	
Zip Code 13159	Purpose of Disbursement Salary	Transaction ID : SB17.6270
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Michael Barry</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 6803 Rte. 11		Amount of Each Disbursement this Period 400.00
City Tully	State NY	
Zip Code 13159	Purpose of Disbursement Salary	Transaction ID : SB17.6285
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Michael Barry</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2014</b>
Mailing Address <b>6803 Rte. 11</b>		Amount of Each Disbursement this Period <b>400.00</b> Transaction ID : <b>SB17.6294</b>
City <b>Tully</b> State <b>NY</b> Zip Code <b>13159</b>	Purpose of Disbursement <b>Salary</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michael Barry</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2014</b>
Mailing Address <b>6803 Rte. 11</b>		Amount of Each Disbursement this Period <b>304.29</b> Transaction ID : <b>SB17.6313</b>
City <b>Tully</b> State <b>NY</b> Zip Code <b>13159</b>	Purpose of Disbursement <b>Reimbursements for gas</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Michael Barry</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2014</b>
Mailing Address <b>6803 Rte. 11</b>		Amount of Each Disbursement this Period <b>156.02</b> Transaction ID : <b>SB17.6314</b>
City <b>Tully</b> State <b>NY</b> Zip Code <b>13159</b>	Purpose of Disbursement <b>Reimbursements for food</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>860.31</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Michael Barry</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 6803 Rte. 11			Amount of Each Disbursement this Period 4.60	
City Tully	State NY	Zip Code 13159	Transaction ID : SB17.6315	
Purpose of Disbursement Reimbursement for toll		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Michael Barry</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014	
Mailing Address 6803 Rte. 11			Amount of Each Disbursement this Period 400.00	
City Tully	State NY	Zip Code 13159	Transaction ID : SB17.6330	
Purpose of Disbursement Salary		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Michael Barry</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014	
Mailing Address 6803 Rte. 11			Amount of Each Disbursement this Period 27.42	
City Tully	State NY	Zip Code 13159	Transaction ID : SB17.6337	
Purpose of Disbursement Reimbursement for food		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	432.02
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 55	
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Michael Barry</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 07 / 2014</b>
Mailing Address <b>6803 Rte. 11</b>		Amount of Each Disbursement this Period <b>150.27</b> <b>Transaction ID : SB17.6338</b>
City <b>Tully</b>	State <b>NY</b>	
Zip Code <b>13159</b>	Purpose of Disbursement <b>Reimbursements for gas</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Capitol Promotions</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 21 / 2014</b>
Mailing Address <b>PO Box 231</b>		Amount of Each Disbursement this Period <b>1435.24</b> <b>Transaction ID : SB17.6345</b>
City <b>Glenside</b>	State <b>PA</b>	
Zip Code <b>19038</b>	Purpose of Disbursement <b>Printing and campaign signs</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Coffee Cakes</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2014</b>
Mailing Address <b>229 Main St.</b>		Amount of Each Disbursement this Period <b>500.00</b> <b>Transaction ID : SB17.6317</b>
City <b>Brookville</b>	State <b>PA</b>	
Zip Code <b>15825</b>	Purpose of Disbursement <b>Deposit for Election Night event</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2085.51</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Coffee Cakes</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 229 Main St.		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.6320</b>
City Brookville	State PA	
Zip Code 15825	Purpose of Disbursement Election Night event hosting/catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Comcast Spotlight LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address PO Box 8500-53003		Amount of Each Disbursement this Period 5270.00 <b>Transaction ID : SB17.6357</b>
City Philadelphia	State PA	
Zip Code 19178	Purpose of Disbursement Campaign television commercials	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Comcast Spotlight LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address PO Box 8500-53003		Amount of Each Disbursement this Period 5100.00 <b>Transaction ID : SB17.6360</b>
City Philadelphia	State PA	
Zip Code 19178	Purpose of Disbursement Campaign television commercials	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11870.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 55	
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Comcast Spotlight LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address PO Box 8500-53003		Amount of Each Disbursement this Period 499.80 <b>Transaction ID : SB17.6373</b>
City Philadelphia	State PA Zip Code 19178	
Purpose of Disbursement Campaign television commercials		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CPEC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address PO Box 465		Amount of Each Disbursement this Period 2545.94 <b>Transaction ID : SB17.6370</b>
City State College	State PA Zip Code 16804	
Purpose of Disbursement Fee for polling services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Democracy Engine LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 850 Quincy Street NW #402		Amount of Each Disbursement this Period 95.40 <b>Transaction ID : SB17.6339</b>
City Washington	State DC Zip Code 20011	
Purpose of Disbursement Processing fee for online donations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3141.14
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Democracy Engine LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 850 Quincy Street NW #402			Amount of Each Disbursement this Period 89.62
City Washington	State DC	Zip Code 20011	
Purpose of Disbursement Processing fee for online donations		Candidate Name	Transaction ID : SB17.6340
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Democracy Engine LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 850 Quincy Street NW #402			Amount of Each Disbursement this Period 32.87
City Washington	State DC	Zip Code 20011	
Purpose of Disbursement Processing fee for online donations		Candidate Name	Transaction ID : SB17.6341
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Democracy Engine LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 850 Quincy Street NW #402			Amount of Each Disbursement this Period 24.42
City Washington	State DC	Zip Code 20011	
Purpose of Disbursement Processing fee for online donations		Candidate Name	Transaction ID : SB17.6342
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/Type	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	146.91
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 55	
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Democracy Engine LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2014</b>
Mailing Address <b>850 Quincy Street NW #402</b>		Amount of Each Disbursement this Period <b>77.51</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20011</b>	Purpose of Disbursement <b>Processing fee for online donations</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>SB17.6343</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Democracy Engine LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 03 / 2014</b>
Mailing Address <b>850 Quincy Street NW #402</b>		Amount of Each Disbursement this Period <b>12.77</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20011</b>	Purpose of Disbursement <b>Processing fee for online donations</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>SB17.6344</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Foxdale Village</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 24 / 2014</b>
Mailing Address <b>500 E. Marylyn Ave.</b>		Amount of Each Disbursement this Period <b>299.00</b>
City <b>State College</b> State <b>PA</b> Zip Code <b>16801</b>	Purpose of Disbursement <b>Expenses for Senior Breakfast event on 10/17/14</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>SB17.6376</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>389.28</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 55	
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Ray Hall</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 316 Main St.		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB17.6387</b>
City Brookville	State PA	
Zip Code 15825	Purpose of Disbursement In-kind - Rent for campaign staff (partial month)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Emmett Hare</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 50 Lincoln Rd. Apt. 5L		Amount of Each Disbursement this Period 900.00 <b>Transaction ID : SB17.6266</b>
City Brooklyn	State NY	
Zip Code 11225	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Emmett Hare</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 50 Lincoln Rd. Apt. 5L		Amount of Each Disbursement this Period 900.00 <b>Transaction ID : SB17.6272</b>
City Brooklyn	State NY	
Zip Code 11225	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 55			
	<input checked="" type="checkbox"/> 17 <input 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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Emmett Hare</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 50 Lincoln Rd. Apt. 5L		Amount of Each Disbursement this Period 900.00 <b>Transaction ID : SB17.6290</b>
City Brooklyn	State NY	
Zip Code 11225	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Emmett Hare</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 50 Lincoln Rd. Apt. 5L		Amount of Each Disbursement this Period 60.00 <b>Transaction ID : SB17.6299</b>
City Brooklyn	State NY	
Zip Code 11225	Purpose of Disbursement Reimbursement for gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Emmett Hare</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 50 Lincoln Rd. Apt. 5L		Amount of Each Disbursement this Period 10.58 <b>Transaction ID : SB17.6300</b>
City Brooklyn	State NY	
Zip Code 11225	Purpose of Disbursement Reimbursement for office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	970.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Emmett Hare</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014		
Mailing Address 50 Lincoln Rd. Apt. 5L			Amount of Each Disbursement this Period 38.63		
City Brooklyn	State NY	Zip Code 11225	Transaction ID : SB17.6301		
Purpose of Disbursement Reimbursement for food		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Emmett Hare</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014		
Mailing Address 50 Lincoln Rd. Apt. 5L			Amount of Each Disbursement this Period 900.00		
City Brooklyn	State NY	Zip Code 11225	Transaction ID : SB17.6326		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Emmett Hare</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014		
Mailing Address 50 Lincoln Rd. Apt. 5L			Amount of Each Disbursement this Period 10.18		
City Brooklyn	State NY	Zip Code 11225	Transaction ID : SB17.6331		
Purpose of Disbursement Reimbursement for food		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	948.81
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 55	
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Bill Mushrush</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 427 Liberty St.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.6316</b>
City Clarion	State PA	
Zip Code 16214	Purpose of Disbursement Videographer for campaign commercials	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Bill Mushrush</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 427 Liberty St.		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB17.6321</b>
City Clarion	State PA	
Zip Code 16214	Purpose of Disbursement Videographer fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Penn Blue Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 267 Sassafras St.		Amount of Each Disbursement this Period 5200.00 <b>Transaction ID : SB17.6324</b>
City Harrisburg	State PA	
Zip Code 17101	Purpose of Disbursement Campaign manager services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Brian Quinlan</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014		
Mailing Address 26 Glenside Dr.			Amount of Each Disbursement this Period 400.00		
City New City	State NY	Zip Code 10956	Transaction ID : SB17.6269		
Purpose of Disbursement Salary		Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Brian Quinlan</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014		
Mailing Address 26 Glenside Dr.			Amount of Each Disbursement this Period 400.00		
City New City	State NY	Zip Code 10956	Transaction ID : SB17.6284		
Purpose of Disbursement Salary		Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Brian Quinlan</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014		
Mailing Address 26 Glenside Dr.			Amount of Each Disbursement this Period 400.00		
City New City	State NY	Zip Code 10956	Transaction ID : SB17.6293		
Purpose of Disbursement Salary		Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Brian Quinlan</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014		
Mailing Address 26 Glenside Dr.			Amount of Each Disbursement this Period 492.46		
City New City	State NY	Zip Code 10956	Transaction ID : SB17.6310		
Purpose of Disbursement Reimbursements for gas		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Brian Quinlan</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014		
Mailing Address 26 Glenside Dr.			Amount of Each Disbursement this Period 116.73		
City New City	State NY	Zip Code 10956	Transaction ID : SB17.6311		
Purpose of Disbursement Reimbursements for food		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Brian Quinlan</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014		
Mailing Address 26 Glenside Dr.			Amount of Each Disbursement this Period 31.42		
City New City	State NY	Zip Code 10956	Transaction ID : SB17.6312		
Purpose of Disbursement Reimbursement for office supplies		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	640.61
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 55	
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Brian Quinlan</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 26 Glenside Dr.		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.6329</b>
City New City	State NY	
Zip Code 10956	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Brian Quinlan</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 26 Glenside Dr.		Amount of Each Disbursement this Period 86.71 <b>Transaction ID : SB17.6335</b>
City New City	State NY	
Zip Code 10956	Purpose of Disbursement Reimbursements for food	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Brian Quinlan</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 26 Glenside Dr.		Amount of Each Disbursement this Period 80.69 <b>Transaction ID : SB17.6336</b>
City New City	State NY	
Zip Code 10956	Purpose of Disbursement Reimbursements for gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	567.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 55			
	<input checked="" type="checkbox"/> 17 <input 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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Ralbovsky</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 24 Crescent Rd Apt D		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.6268</b>
City Greenbelt	State MD	
Zip Code 20770	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Joseph Ralbovsky</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 24 Crescent Rd Apt D		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.6283</b>
City Greenbelt	State MD	
Zip Code 20770	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Joseph Ralbovsky</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 24 Crescent Rd Apt D		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.6292</b>
City Greenbelt	State MD	
Zip Code 20770	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Ralbovsky</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 24 Crescent Rd Apt D		Amount of Each Disbursement this Period 194.95 <b>Transaction ID : SB17.6305</b>
City Greenbelt	State MD Zip Code 20770	
Purpose of Disbursement Reimbursements for gas		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Joseph Ralbovsky</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 24 Crescent Rd Apt D		Amount of Each Disbursement this Period 15.00 <b>Transaction ID : SB17.6306</b>
City Greenbelt	State MD Zip Code 20770	
Purpose of Disbursement Reimbursement for parking		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Joseph Ralbovsky</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 24 Crescent Rd Apt D		Amount of Each Disbursement this Period 142.34 <b>Transaction ID : SB17.6307</b>
City Greenbelt	State MD Zip Code 20770	
Purpose of Disbursement Reimbursement for rental car		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	352.29
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 55	
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Ralbovsky</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 24 Crescent Rd Apt D		Amount of Each Disbursement this Period 215.94 <b>Transaction ID : SB17.6308</b>
City Greenbelt	State MD Zip Code 20770	
Purpose of Disbursement Reimbursements for food	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Joseph Ralbovsky</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 24 Crescent Rd Apt D		Amount of Each Disbursement this Period 12.00 <b>Transaction ID : SB17.6309</b>
City Greenbelt	State MD Zip Code 20770	
Purpose of Disbursement Reimbursement for shoe repair	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Joseph Ralbovsky</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 24 Crescent Rd Apt D		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.6328</b>
City Greenbelt	State MD Zip Code 20770	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	627.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 55	
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Ralbovsky</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 24 Crescent Rd Apt D		Amount of Each Disbursement this Period 67.13 <b>Transaction ID : SB17.6333</b>
City Greenbelt State MD Zip Code 20770	Purpose of Disbursement Reimbursement for postage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Joseph Ralbovsky</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 24 Crescent Rd Apt D		Amount of Each Disbursement this Period 75.31 <b>Transaction ID : SB17.6334</b>
City Greenbelt State MD Zip Code 20770	Purpose of Disbursement Reimbursement for gas	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kelly Ryan</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 8 Dale Ct.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.6267</b>
City Hicksville State NY Zip Code 11801	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	642.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Kelly Ryan</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 8 Dale Ct.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.6271</b>
City Hicksville	State NY	
Zip Code 11801	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Kelly Ryan</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 8 Dale Ct.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.6291</b>
City Hicksville	State NY	
Zip Code 11801	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Kelly Ryan</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 8 Dale Ct.		Amount of Each Disbursement this Period 211.44 <b>Transaction ID : SB17.6302</b>
City Hicksville	State NY	
Zip Code 11801	Purpose of Disbursement Reimbursements for gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1211.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Kelly Ryan</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014		
Mailing Address 8 Dale Ct.			Amount of Each Disbursement this Period 100.48		
City Hicksville	State NY	Zip Code 11801	Transaction ID : SB17.6303		
Purpose of Disbursement Reimbursements for food		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Kelly Ryan</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014		
Mailing Address 8 Dale Ct.			Amount of Each Disbursement this Period 24.74		
City Hicksville	State NY	Zip Code 11801	Transaction ID : SB17.6304		
Purpose of Disbursement Reimbursement for office supplies		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Kelly Ryan</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014		
Mailing Address 8 Dale Ct.			Amount of Each Disbursement this Period 500.00		
City Hicksville	State NY	Zip Code 11801	Transaction ID : SB17.6327		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	625.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Kelly Ryan</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014	
Mailing Address 8 Dale Ct.			Amount of Each Disbursement this Period 55.91	
City Hicksville	State NY	Zip Code 11801	Transaction ID : SB17.6332	
Purpose of Disbursement Reimbursements for food		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Kerith Strano Taylor</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014	
Mailing Address 340 Main Street			Amount of Each Disbursement this Period 26.39	
City Brookville	State PA	Zip Code 15825	Transaction ID : SB17.6383	
Purpose of Disbursement In-kind - meal (Say Sushi, State College)		Category/ Type		
Candidate Name				
Office Sought: <input checked="" 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: PA	District: 05			

Full Name (Last, First, Middle Initial) <b>c. Kerith Strano Taylor</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014	
Mailing Address 340 Main Street			Amount of Each Disbursement this Period 50.52	
City Brookville	State PA	Zip Code 15825	Transaction ID : SB17.6382	
Purpose of Disbursement In-kind - Gasoline (Quick Stop, State College)		Category/ Type		
Candidate Name				
Office Sought: <input checked="" 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: PA	District: 05			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	132.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Kerith Strano Taylor</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 340 Main Street		Amount of Each Disbursement this Period 49.00 <b>Transaction ID : SB17.6385</b>
City Brookville	State PA	
Zip Code 15825	Purpose of Disbursement In-kind - Web hosting (Nationbuilder)	Category/ Type
Candidate Name	Office Sought: <input checked="" 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: PA District: 05	

Full Name (Last, First, Middle Initial) <b>B. Time Warner Cable</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 2028 Filmore Ave.		Amount of Each Disbursement this Period 2000.90 <b>Transaction ID : SB17.6348</b>
City Erie	State PA	
Zip Code 16506	Purpose of Disbursement Campaign commercials	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Time Warner Cable</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 2028 Filmore Ave.		Amount of Each Disbursement this Period 821.00 <b>Transaction ID : SB17.6353</b>
City Erie	State PA	
Zip Code 16506	Purpose of Disbursement Campaign commercials	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2870.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 55			
	<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)  
**Committee To Elect Kerith Strano Taylor To Congress**

Full Name (Last, First, Middle Initial) <b>A. Time Warner Cable</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 2028 Filmore Ave.		Amount of Each Disbursement this Period 1734.85
City Erie	State PA Zip Code 16506	
Purpose of Disbursement Campaign television commercials		Transaction ID : SB17.6359
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Unigraphics Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 703 A West Simpson St.		Amount of Each Disbursement this Period 2776.68
City Mechanicsburg	State PA Zip Code 17055	
Purpose of Disbursement Printing and mailing expenses		Transaction ID : SB17.6277
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WJAC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 49 Old Hickory Ln		Amount of Each Disbursement this Period 1500.00
City Johnstown	State PA Zip Code 15905	
Purpose of Disbursement Campaign television commercials		Transaction ID : SB17.6286
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6011.53
<b>TOTAL</b> This Period (last page this line number only).....	52752.74

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

NAME OF COMMITTEE (In Full) **Committee To Elect Kerith Strano Taylor To Congress** Transaction ID : **SC/10.5256**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Kerith Strano Taylor</b>	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 340 Main Street	

City	State	ZIP Code
Brookville	PA	15825

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
09 / 26 / 2014	On demand	5.25 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	20000.00
<b>TOTALS</b> This Period (last page in this line only).....	20000.00

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

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Committee To Elect Kerith Strano Taylor To Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Michael Moser</b>	Nature of Debt (Purpose): Salary (4/4)
Mailing Address 2006 Carlton Dr.	
City State Zip Code Lebanon PA 17042	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">-500.00</div>	<b>Transaction ID : SD10.4815</b>
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">-500.00</div>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Michael Moser</b>	Nature of Debt (Purpose): Salary (4/18)
Mailing Address 2006 Carlton Dr.	
City State Zip Code Lebanon PA 17042	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">-1000.00</div>	<b>Transaction ID : SD10.4816</b>
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">-1000.00</div>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Michael Moser</b>	Nature of Debt (Purpose): Salary (5/30)
Mailing Address 2006 Carlton Dr.	
City State Zip Code Lebanon PA 17042	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1500.00</div>	<b>Transaction ID : SD10.4819</b>
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1500.00</div>	

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>