

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 Katko for Congress

ADDRESS (number and street) 228 S Washington St Ste 115 Alexandria VA 22314-5404 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00556365 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE NY DISTRICT 24

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 MM/DD/YYYY in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY 11/29/2016 through MM/DD/YYYY 12/31/2016

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 Lisker, Lisa, , , Signature of Treasurer Lisker, Lisa, , , [Electronically Filed] Date MM/DD/YYYY 01/30/2017

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Katko for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	1750.00	9275.00
(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)).....	1750.00	9275.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	35915.06	87775.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	20.00	20.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	35895.06	87755.92
8. Cash on Hand at Close of Reporting Period (from Line 27).....	285701.32	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Katko for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	500.00	3450.00
(ii) Unitemized.....	250.00	825.00
(iii) TOTAL of contributions from individuals ▶	750.00	4275.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	5000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1750.00	9275.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	20.00	20.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	6.49	6.49
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	1776.49	9301.49

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 14

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	35915.06	87775.92
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	35915.06	87775.92

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	319839.89
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1776.49
25. SUBTOTAL (add Line 23 and Line 24).....	321616.38
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	35915.06
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	285701.32

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

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

FOR LINE NUMBER: PAGE 5 OF 14
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Katko for Congress

A. Full Name (Last, First, Middle Initial)
Sveen, John, , Dr.,

Mailing Address 302 Wey Bridge Terrace

City State Zip Code
Camillus NY 13031-1951

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

Name of Employer Occupation
CNY Eye Care Physician

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 28 2016

Transaction ID : **AF719B9719EAC4BF8A53**

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Hoffman, Gerald, , ,

Mailing Address 4001 East Genesee Street
Apt. 203

City State Zip Code
Syracuse NY 13214-2155

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

Name of Employer Occupation
Retired Retired

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 28 2016

Transaction ID : **A6C03430EB96F41DE83C**

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 6 OF 14	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Katko for Congress

A. Full Name (Last, First, Middle Initial)
Cintas Corporation Partners Pac

Mailing Address 6800 Cintas Blvd

City Mason	State OH	Zip Code 45040-9151
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FEC ID number of contributing federal political committee. **C** C00449165

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2016

Transaction ID : A32CA9CD5C7424D3EB76

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 14			
	<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)
Katko for Congress

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2016
Mailing Address 100 S Clinton Street		FEC Identification Number C
City Syracuse	State NY	Zip Code 13261-6100
Purpose of Disbursement Postage	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 470.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B8C5ACC20C17440DFBC9 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2016
Mailing Address 100 S Clinton Street		FEC Identification Number C
City Syracuse	State NY	Zip Code 13261-6100
Purpose of Disbursement Postage	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 112.80
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BA18F1FCF9FAE4B8CA0A <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2016
Mailing Address 100 S Clinton Street		FEC Identification Number C
City Syracuse	State NY	Zip Code 13261-6100
Purpose of Disbursement Postage	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 6.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B05527EE4985B4448960 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	589.25
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 14	
	<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)
Katko for Congress

Full Name (Last, First, Middle Initial) A. Sabine, Molly, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016	
Mailing Address 228 South Washington Street			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22314-5408	Amount of Each Disbursement this Period 388.92	
Purpose of Disbursement Mileage Reimbursement		Category/ Type	Transaction ID : BB1A998ADC27943FBBB6	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Katko, John, M, ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016	
Mailing Address 5407 Anvil Drive			FEC Identification Number C C00556365	
City Camillus	State NY	Zip Code 13031-8646	Amount of Each Disbursement this Period 368.79	
Purpose of Disbursement Mileage Reimbursement		Category/ Type	Transaction ID : BE9DE14B97B7B44078EE	
Candidate Name Katko, John, M, ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY District: 24				

Full Name (Last, First, Middle Initial) C. Mocete, Patrick, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016	
Mailing Address 600 Charmouth Drive			FEC Identification Number C	
City Syracuse	State NY	Zip Code 13207-1531	Amount of Each Disbursement this Period 835.64	
Purpose of Disbursement Mileage Reimbursement		Category/ Type	Transaction ID : BF001E477A1CF4075AA1	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1593.35
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 14			
	<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)
Katko for Congress

Full Name (Last, First, Middle Initial) A. Suddaby, Conor, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016		
Mailing Address 228 South Washington Street			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314-5408	Amount of Each Disbursement this Period 258.96		
Purpose of Disbursement Mileage Reimbursement		Category/ Type	Transaction ID : B5AABB95679144A7FBA0		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Advantage, Inc.			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016		
Mailing Address 698 Corporate Center Court Suite D			FEC Identification Number C		
City Westminster	State MD	Zip Code 21157-3051	Amount of Each Disbursement this Period 8204.10		
Purpose of Disbursement Direct Mail		Category/ Type 001	Transaction ID : B4B532C65FA2C4C9C81E		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Epiphany Productions, Inc.			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016		
Mailing Address 104 Hume Avenue			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22301-1015	Amount of Each Disbursement this Period 11350.00		
Purpose of Disbursement Fundraising Consulting		Category/ Type 001	Transaction ID : B786E3B44E89146AA975		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	19813.06
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 14			
	<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)
Katko for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016		
Mailing Address 300 First Street SE			FEC Identification Number C		
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 212.52		
Purpose of Disbursement Food/Beverage		Category/Type	Transaction ID : B67C5D3E60B0B4526A3F		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Huckaby Davis Lisker			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2016		
Mailing Address 228 S Washington Street Suite 115			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314-5404	Amount of Each Disbursement this Period 7069.78		
Purpose of Disbursement Compliance Consulting		Category/Type 001	Transaction ID : B9D34E54359544A1E988		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Genesee Grande Hotel			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2016		
Mailing Address 060 E Genesee St			FEC Identification Number C		
City Syracuse	State NY	Zip Code 13210	Amount of Each Disbursement this Period 1176.12		
Purpose of Disbursement Event Catering		Category/Type 001	Transaction ID : B07CAA244105744ACBAC		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	8458.42
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 14			
	<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)
Katko for Congress

Full Name (Last, First, Middle Initial) A. BB&T		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2016
Mailing Address 1909 K Street NW		FEC Identification Number C
City Washington	State DC	Zip Code 20006-1152
Purpose of Disbursement Bank Fees		Amount of Each Disbursement this Period 123.00
Candidate Name	Category/Type	Transaction ID : B4FFC5475E7634B249BC
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. BB&T		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2016
Mailing Address 1909 K Street NW		FEC Identification Number C
City Washington	State DC	Zip Code 20006-1152
Purpose of Disbursement Credit Card Payment--See Memos		Amount of Each Disbursement this Period 2742.44
Candidate Name	Category/Type	Transaction ID : BF2863161FAA9415D94E
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2016
Mailing Address 100 S Clinton Street		FEC Identification Number C
City Syracuse	State NY	Zip Code 13261-6100
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 58.05
Candidate Name	Category/Type	Transaction ID : B9B9B9C607B164190966
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2865.44
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 14	
	<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)
Katko for Congress

Full Name (Last, First, Middle Initial) A. FedEx		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2016
Mailing Address 3875 Airways Boulevard		FEC Identification Number C
City Memphis	State TN	Zip Code 38116-5070
Purpose of Disbursement Shipping	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 262.47
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B07B6653BFB534920A7E <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Sheraton Syracuse University		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2016
Mailing Address 801 University Avenue		FEC Identification Number C
City Syracuse	State NY	Zip Code 13210-1720
Purpose of Disbursement Event Space Rental/Catering	Category/ Type	
Candidate Name		Amount of Each Disbursement this Period 1726.17
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9120A884617F4646A70 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. NBT Cardmember Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2016
Mailing Address 52 S Broad Street		FEC Identification Number C
City Norwich	State NY	Zip Code 13815-1646
Purpose of Disbursement Credit Card Payment--See Memos	Category/ Type	
Candidate Name		Amount of Each Disbursement this Period 2177.65
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BC245C346F3AE4A3F8F1 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2177.65
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 14	
	<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)
Katko for Congress

Full Name (Last, First, Middle Initial) A. NBT Cardmember Services			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2016	
Mailing Address 52 S Broad Street			FEC Identification Number C	
City Norwich	State NY	Zip Code 13815-1646	Amount of Each Disbursement this Period 172.75	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Transaction ID : B05F2F30B6A1E441DA93	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Camillus Liquors			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2016	
Mailing Address 120 Township Boulevard			FEC Identification Number C	
City Camillus	State NY	Zip Code 13031	Amount of Each Disbursement this Period 472.77	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B98CE419F2FB142E0ADD	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Sheraton Syracuse University			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2016	
Mailing Address 801 University Avenue			FEC Identification Number C	
City Syracuse	State NY	Zip Code 13210-1720	Amount of Each Disbursement this Period 168.37	
Purpose of Disbursement Event Space Rental/Catering		Category/ Type	Transaction ID : B5D6D23FEE68A4480909	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 14	
	<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)
Katko for Congress

Full Name (Last, First, Middle Initial) A. Costco		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2016
Mailing Address 120 Township Boulevard		FEC Identification Number C
City Camillus	State NY	Zip Code 13031-1659
Purpose of Disbursement Office Supplies	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 653.93
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B7736A1E34F3B4E2CB6F
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	35497.17