

# 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

Citizens for Boyle

ADDRESS (number and street)

499 S. Capitol St. SW

Suite 422

Check if different than previously reported. (ACC)

Washington

DC

20003

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00543363

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

PA

13

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 /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 2017

through

M M /

D D /

Y Y Y Y 2017

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

Angerholzer, Lindsay, F., ,

Type or Print Name of Treasurer

Signature of Treasurer

Angerholzer, Lindsay, F., ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 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.

Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Citizens for Boyle**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	186038.00	422628.04
(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)).....	186038.00	422628.04
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	62090.88	204555.66
(b) Total Offsets to Operating Expenditures (from Line 14).....	186.42	187.70
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	61904.46	204367.96
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	699481.47	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	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

Citizens for Boyle

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).....	97525.00	136925.00
(ii) Unitemized.....	3063.00	8153.04
(iii) TOTAL of contributions from individuals ▶	100588.00	145078.04
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	85450.00	277550.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	186038.00	422628.04
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.) .....	186.42	187.70
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	192.25	699.11
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	186416.67	423514.85

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 99

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	62090.88	204555.66
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	4975.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	62090.88	209530.66

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	575155.68
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	186416.67
25. SUBTOTAL (add Line 23 and Line 24).....	761572.35
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	62090.88
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	699481.47

**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 99  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 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)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Baiada, Ann, , ,**

Mailing Address 741 Mill St

City Moorestown State NJ Zip Code 08057-1879

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

Name of Employer Badaya Nurses Occupation Founder

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2017

**Transaction ID : C10910319**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

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

Mailing Address 709 Linden Ave

City Riverton State NJ Zip Code 08077-1054

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

Name of Employer Fox Chase Cancer Center Occupation Deputy Director

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  
 09 / 19 / 2017

**Transaction ID : C10912835**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

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

Mailing Address 5020 Gloria Ave

City Encino State CA Zip Code 91436-1529

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

Name of Employer ByNancy Occupation Graphic Designer

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  
 08 / 22 / 2017

**Transaction ID : C10908915**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ \_\_\_\_\_ 1750.00

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

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

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

FOR LINE NUMBER: PAGE 6 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Belsky, Miri, , ,**

Mailing Address 23637 Park Capri  
Unit 34

City Calabasas State CA Zip Code 91302-1617

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

Name of Employer Washington Institute Occupation Development

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2017

Transaction ID : **C10908917**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 4630 Noeline Ave

City Encino State CA Zip Code 91436-2104

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

Name of Employer N/A Occupation N/A

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2017

Transaction ID : **C10908918**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 5023 S Convent Ln  
Apt J

City Philadelphia State PA Zip Code 19114-3140

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

Name of Employer Borski Associates LLC Occupation Borski Associates LLC

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2017

Transaction ID : **C10912336**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

1500.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 7 OF 99	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

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

Mailing Address 5265 Genesta Ave

City Encino	State CA	Zip Code 91316-2617
----------------	-------------	------------------------

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

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

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
08 / 22 / 2017

**Transaction ID : C10908919**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 848 Buck Lane

City Haverford	State PA	Zip Code 19041-1204
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FEC ID number of contributing federal political committee. **C**

Name of Employer McCormick Taylor	Occupation P.E.
--------------------------------------	--------------------

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
09 / 21 / 2017

**Transaction ID : C10912922**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 122 Hillside Road

City Wayne	State PA	Zip Code 19087
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FEC ID number of contributing federal political committee. **C**

Name of Employer Department of Justice	Occupation Lawyer
---	----------------------

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
09 / 21 / 2017

**Transaction ID : C10912923**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2250.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 99  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Cohen, Josh, , ,**

Mailing Address 14271 Dickens St  
Unit 301

City Sherman Oaks State CA Zip Code 91423-5801

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

Name of Employer Occupation  
UCLA Medical Center Physician

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  
08 / 22 / 2017

Transaction ID : **C10908920**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 14701 Valley Vista Blvd

City Sherman Oaks State CA Zip Code 91403-4114

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

Name of Employer Occupation  
UCLA Professor

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 22 / 2017

Transaction ID : **C10908921**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 160 Shelly Lane

City Philadelphia State PA Zip Code 19115-2709

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

Name of Employer Occupation  
Independence Visitor Center Corp. President & CEO

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  
09 / 21 / 2017

Transaction ID : **C10912924**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 99	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**de Toledo, Philip, , ,**

Mailing Address 3611 Longridge Ave

City Sherman Oaks	State CA	Zip Code 91423-4917
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FEC ID number of contributing federal political committee. **C**

Name of Employer Capital Group Companies	Occupation Manager
---	-----------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2017

**Transaction ID : C10908929**

Amount of Each Receipt this Period  
 1400.00

Memo Item

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

Mailing Address 92 Warren St  
Apt 3E

City New York	State NY	Zip Code 10007-1185
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FEC ID number of contributing federal political committee. **C**

Name of Employer QVT Financial LP	Occupation Finance
--------------------------------------	-----------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017

**Transaction ID : C10912954**

Amount of Each Receipt this Period  
 2500.00

Memo Item

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

Mailing Address 925 Harvest Dr  
Ste 300

City Blue Bell	State PA	Zip Code 19422-1956
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FEC ID number of contributing federal political committee. **C**

Name of Employer Elliott Greenleaf	Occupation Chairman and Senior Shareholder
---------------------------------------	---

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  
 09 / 21 / 2017

**Transaction ID : C10912930**

Amount of Each Receipt this Period  
 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4900.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 99  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Emmerich, Frank, R, , Jr.**

Mailing Address 612 Cheltena Ave

City: Jenkintown State: PA Zip Code: 19046

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

Name of Employer: Conrad O'Brien Occupation: Attorney

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  
09 / 30 / 2017

**Transaction ID : C10914063**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 110 Granville Ave  
Apt 102

City: Los Angeles State: CA Zip Code: 90049-4247

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

Name of Employer: Direct Lending Investments Occupation: Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 23 / 2017

**Transaction ID : C10908930**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 9679 Pine Rd

City: Philadelphia State: PA Zip Code: 19115-2747

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

Name of Employer: Garden of Earthly Delights Occupation: Retail Store owner

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  
09 / 21 / 2017

**Transaction ID : C10912931**

Amount of Each Receipt this Period  
250.00

Memo Item

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

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

2000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 99  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Fihman, Eric, , ,**

Mailing Address 10719 Valleyheart Dr

City State Zip Code  
Studio City CA 91604-3426

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

Name of Employer Occupation  
NBCUniversal CPA

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 23 2017

**Transaction ID : C10908932**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 106 Hampton Ln

City State Zip Code  
Blue Bell PA 19422-2605

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

Name of Employer Occupation  
Fox Chase Cancer Center President & CEO

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  
09 28 2017

**Transaction ID : C10913434**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 16830 Ventura Blvd  
Ste 400

City State Zip Code  
Encino CA 91436-1726

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

Name of Employer Occupation  
Fishman, Block and Diamond CPA

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  
08 23 2017

**Transaction ID : C10908933**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 99  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Fox, Robert, , ,**

Mailing Address 401 E City Ave  
Ste 901

City Bala Cynwyd State PA Zip Code 19004-1131

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

Name of Employer Manko, Gold, Katcher & Fox, LLP Occupation Partner

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 10 / 2017

Transaction ID : **C10906903**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

Mailing Address 135 Central Park W  
Apt 11

City New York State NY Zip Code 10023-2413

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

Name of Employer Soroban Capital Partners Occupation Finance

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2017

Transaction ID : **C10912945**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

Mailing Address 1445 6th St  
Apt 302

City Santa Monica State CA Zip Code 90401-2538

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

Name of Employer Gibson Dunn Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 28 / 2017

Transaction ID : **C10909205**

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5700.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 99	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Girvan, Greg, , ,**

Mailing Address 22736 Margarita Dr

City Woodland Hills	State CA	Zip Code 91364-4033
------------------------	-------------	------------------------

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

Name of Employer FMBK LLP	Occupation Attorney
------------------------------	------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2017

**Transaction ID : C10909208**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

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

Mailing Address 1360 E 14th St  
Ste 101

City Brooklyn	State NY	Zip Code 11230-5961
------------------	-------------	------------------------

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

Name of Employer Goldmont Realty Corp	Occupation Real Estate
--	---------------------------

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  
 09 / 29 / 2017

**Transaction ID : C10913513**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

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

Mailing Address 6004 Pidcock Creek Rd

City New Hope	State PA	Zip Code 18938-9310
------------------	-------------	------------------------

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

Name of Employer Morris Iron and Steel Company	Occupation Administrator
---	-----------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017

**Transaction ID : C10912933**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 4200.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 14 OF 99  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Greller, Ronald, W., ,**

Mailing Address 6004 Pidcock Creek Rd

City New Hope State PA Zip Code 18938-9310

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

Name of Employer Morris Iron and Steel Co., Inc. Occupation President

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2017

Transaction ID : **C10912934**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

Mailing Address 404 Readleaf Road

City Wynnewood State PA Zip Code 19096

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

Name of Employer Children's Hospital of Philadelphia Occupation Senior Vice President, Public Affairs

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  
07 / 20 / 2017

Transaction ID : **C10898891**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 101 Hedgerow Way

City Lansdale State PA Zip Code 19446-5071

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

Name of Employer none Occupation volunteer

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 29 / 2017

Transaction ID : **C10909332**

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3450.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Herman, Russell, , ,**  
 Mailing Address 17 Ave of 2 Rivers S  
 City Rumson State NJ Zip Code 07760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Dawson-Herman Capital Management, Inc. Occupation Finance  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017  
**Transaction ID : C10912935**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Heyman, Danny, , ,**  
 Mailing Address 16337 Francina Dr  
 City Encino State CA Zip Code 91436-4231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Daniel Heyman CPA Occupation Accountant  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2017  
**Transaction ID : C10909212**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Hilferty, Daniel, J., , III**  
 Mailing Address 3020 Market Street  
 City Philadelphia State PA Zip Code 19104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Independence Blue Cross Occupation President & CEO  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017  
**Transaction ID : C10912938**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5700.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 99	
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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Hochman, Jessica, , ,**

Mailing Address 4205 Mammoth Ave

City Sherman Oaks	State CA	Zip Code 91423-4325
----------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Physician
-----------------------------------	-------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 28 / 2017

**Transaction ID : C10909213**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 130 South 18th Street  
Apartment 3301

City Philadelphia	State PA	Zip Code 19103
----------------------	-------------	-------------------

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

Name of Employer Pepsi Cola	Occupation Vice President
--------------------------------	------------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 21 / 2017

**Transaction ID : C10912940**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

Mailing Address 130 South 18th Street  
Apartment 3301

City Philadelphia	State PA	Zip Code 19103
----------------------	-------------	-------------------

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

Name of Employer Pepsi Cola	Occupation Vice President
--------------------------------	------------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 21 / 2017

**Transaction ID : C10912941**

Amount of Each Receipt this Period  
2700.00

Memo Item

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



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

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

FOR LINE NUMBER: PAGE 17 OF 99  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

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

Mailing Address 413 W Mermaid Ln

City Philadelphia State PA Zip Code 19118-4203

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

Name of Employer Kleinbard Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 20 2017

**Transaction ID : C10898403**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 3674 Dixie Canyon Ave

City Sherman Oaks State CA Zip Code 91423-4824

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

Name of Employer Retired Occupation Retired

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 28 2017

**Transaction ID : C10909214**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 5537 Bluebell Ave

City Valley Village State CA Zip Code 91607-1909

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

Name of Employer JSI Acquisitions Occupation COO

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 28 2017

**Transaction ID : C10909215**

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 99  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

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

Mailing Address 155 On the Green

City Lebanon State PA Zip Code 17042

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

Name of Employer DRT Transportation LLC Occupation President/CEO

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 01 2017

**Transaction ID : C10899994**

Amount of Each Receipt this Period  
2000.00

Memo Item

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

Mailing Address 229 Shawnee Rd

City Ardmore State PA Zip Code 19003-1724

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

Name of Employer Conrad O'Brien PC Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 29 2017

**Transaction ID : C10913543**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 4019 S Warner Rd

City Lafayette Hill State PA Zip Code 19444-1421

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

Name of Employer Retired Occupation Retired teacher

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  
09 09 2017

**Transaction ID : C10910325**

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2750.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 99  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Kerlin, Michael, , ,**

Mailing Address 2215 Pine St

City Philadelphia State PA Zip Code 19103-6515

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

Name of Employer McKinsey Occupation Management Consulting

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  
09 / 14 / 2017

**Transaction ID : C10912413**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 715 Washington Ln

City Jenkintown State PA Zip Code 19046-2953

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

Name of Employer Law Offices of Sean Kilkenny Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 13 / 2017

**Transaction ID : C10912331**

Amount of Each Receipt this Period  
2600.00

Memo Item

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

Mailing Address 1735 Market St Ste 4010

City Philadelphia State PA Zip Code 19103-7530

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

Name of Employer The Klein Company Occupation CEO/President/Founder

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 24 / 2017

**Transaction ID : C10898894**

Amount of Each Receipt this Period  
2700.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5550.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 OF 99  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

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

Mailing Address 1735 Market St  
Ste 4010

City Philadelphia State PA Zip Code 19103-7530

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

Name of Employer The Klein Company Occupation CEO/President/Founder

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 24 2017

Transaction ID : **C10898895**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

Mailing Address 4400 Nogales Dr

City Tarzana State CA Zip Code 91356-5120

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

Name of Employer Retired Occupation Retired

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 31 2017

Transaction ID : **C10899465**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 16153 Valley Meadow Place

City Encino State CA Zip Code 91436

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

Name of Employer Capital Group Occupation Portfolio Manager

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 30 2017

Transaction ID : **C10910015**

Amount of Each Receipt this Period  
2700.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5900.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 OF 99  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Ladd, Dawn, A., ,**

Mailing Address 245 E 13th Street  
Apartment 9

City New York State NY Zip Code 10003

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

Name of Employer Occupation  
Aurora Lampworks Inc. Owner

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 30 2017

Transaction ID : **C10914064**

Amount of Each Receipt this Period  
750.00

Memo Item

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

Mailing Address 3470 Daniella Ct

City Calabasas State CA Zip Code 91302-3087

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

Name of Employer Occupation  
Self Employed Periodontist/Certified Yoga Teacher

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 28 2017

Transaction ID : **C10909216**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 20318 Lorenzana Dr

City Woodland Hills State CA Zip Code 91364-2438

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

Name of Employer Occupation  
CSUN/LAUSD Semi-Retired Educator

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 28 2017

Transaction ID : **C10909217**

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

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

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

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

FOR LINE NUMBER: PAGE 22 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Leitner, Marissa, , ,**  
 Mailing Address 4103 Hayvenhurst Dr  
 City Encino State CA Zip Code 91436-3751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Valley Beth Shalom Day School Occupation School Psychologist  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2017  
**Transaction ID : C10909218**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Levin, Robert, , ,**  
 Mailing Address 12270 Townsend Road  
 City Philadelphia State PA Zip Code 19154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Holt's Cigar Company Occupation CEO & President  
 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  
 08 / 25 / 2017  
**Transaction ID : C10910007**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Li, Lindy, , ,**  
 Mailing Address 2711 Dudley Street  
 City Philadelphia State PA Zip Code 19145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Lindy Li for Congress Occupation Candidate  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017  
**Transaction ID : C10912942**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1800.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 23 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Lockman, Ryan, , ,**

Mailing Address 1540 S 4th St

City Philadelphia State PA Zip Code 19147-6531

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

Name of Employer Mark B. Frost & Associates Occupation Attorney

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  
 09 / 14 / 2017

**Transaction ID : C10912473**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50.00

Memo Item

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

Mailing Address 1540 S 4th St

City Philadelphia State PA Zip Code 19147-6531

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

Name of Employer Mark B. Frost & Associates Occupation Attorney

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  
 09 / 14 / 2017

**Transaction ID : C10912474**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 200.00

Memo Item

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

Mailing Address 5118 Bellaire Ave

City Valley Village State CA Zip Code 91607-2908

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

Name of Employer Self Employed Occupation Accountant

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2017

**Transaction ID : C10913418**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ \_\_\_\_\_ 750.00

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

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

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

FOR LINE NUMBER: PAGE 24 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Lynch, Raymond, , , Jr.**

Mailing Address 1755 Mohawk Way

City: Salt Lake City      State: UT      Zip Code: 84108

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

Name of Employer: Huntsman Cancer Hospital      Occupation: Executive Director

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  
 09 / 30 / 2017

**Transaction ID : C10914067**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

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

Mailing Address PO Box 3066

City: Beverly Hills      State: CA      Zip Code: 90212-0066

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

Name of Employer: Millco Investments      Occupation: Real Estate

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2017

**Transaction ID : C10909219**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

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

Mailing Address 3402 Janellen Dr

City: Pikesville      State: MD      Zip Code: 21208-1807

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

Name of Employer: Keystone Strategic Advisers      Occupation: Consultant

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  
 09 / 21 / 2017

**Transaction ID : C10912926**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

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

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

\_\_\_\_\_ 1000.00

\_\_\_\_\_



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 99	
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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Nahmias, Ed, , ,**

Mailing Address 4078 Sapphire Dr

City Encino	State CA	Zip Code 91436-3647
----------------	-------------	------------------------

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

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 28 / 2017

**Transaction ID : C10909220**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 1814 Parnell Ave  
Apt 3

City Los Angeles	State CA	Zip Code 90025-4824
---------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Accountant
-----------------------------------	--------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 28 / 2017

**Transaction ID : C10909221**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 225 Central Park West #1214

City New York	State NY	Zip Code 10024
------------------	-------------	-------------------

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

Name of Employer The Corcoran Group	Occupation Real Estate Broker
--	----------------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
900.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

**Transaction ID : C10914072**

Amount of Each Receipt this Period  
900.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1900.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 26 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Perelman, Alison, , ,**

Mailing Address 609 S 9th St

City Philadelphia State PA Zip Code 19147-2027

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

Name of Employer Philadelphia 3.0 Occupation Executive Director

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  
 09 / 21 / 2017

**Transaction ID : C10912915**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

Mailing Address 2 Jennifer Lane

City Churchville State PA Zip Code 18966

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

Name of Employer GM Capital Occupation General Manager

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017

**Transaction ID : C10912948**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

Mailing Address 4123 Woodman Ave

City Sherman Oaks State CA Zip Code 91423-4331

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

Name of Employer Fortified Properties Occupation Real Estate

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  
 08 / 23 / 2017

**Transaction ID : C10908931**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 28 OF 99
	<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)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Richter, Barrie, , ,**

Mailing Address 15814 Sutton St

City Encino	State CA	Zip Code 91436-3409
----------------	-------------	------------------------

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

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 28 / 2017

**Transaction ID : C10909226**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 18681 Pasadero Dr

City Tarzana	State CA	Zip Code 91356-5315
-----------------	-------------	------------------------

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

Name of Employer N/A	Occupation N/A
-------------------------	-------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 28 / 2017

**Transaction ID : C10909228**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 5036 Veloz Ave

City Tarzana	State CA	Zip Code 91356-4514
-----------------	-------------	------------------------

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

Name of Employer Warner Bros.	Occupation Executive
----------------------------------	-------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 28 / 2017

**Transaction ID : C10909229**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 29 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Ruben, Daniel, , ,**

Mailing Address PO Box 1082

City Agoura Hills State CA Zip Code 91376-1082

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

Name of Employer N/A Occupation N/A

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  
 08 28 2017

**Transaction ID : C10909230**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

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

Mailing Address 1160 Park Avenue

City New York State NY Zip Code 10128

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

Name of Employer Venable Occupation Partner

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  
 09 21 2017

**Transaction ID : C10912950**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

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

Mailing Address 4473 Park Arroyo

City Calabasas State CA Zip Code 91302-2808

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

Name of Employer N/A Occupation N/A

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 28 2017

**Transaction ID : C10909231**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

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

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

\_\_\_\_\_ 1000.00

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 30 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Siben, Theresa, Ann, ,**

Mailing Address 728 Sevilla Drive

City: Boca Raton State: FL Zip Code: 33432

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

Name of Employer: Tri County Humane Society Occupation: Dog Adoption Counselor

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2017

**Transaction ID : C10914073**

Amount of Each Receipt this Period  
 2700.00

Memo Item

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

Mailing Address 1060 Bayhead Dr

City: Mamaroneck State: NY Zip Code: 10543-4701

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

Name of Employer: None Occupation: Homemaker

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017

**Transaction ID : C10912927**

Amount of Each Receipt this Period  
 2700.00

Memo Item

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

Mailing Address 1060 Bayhead Dr

City: Mamaroneck State: NY Zip Code: 10543-4701

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

Name of Employer: None Occupation: Homemaker

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017

**Transaction ID : C10912928**

Amount of Each Receipt this Period  
 2300.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7700.00

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

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

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

FOR LINE NUMBER: PAGE 31 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Tenebein, Rebecca, , ,**

Mailing Address 517 Adams St  
Apt 1

City Hoboken State NJ Zip Code 07030-2001

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

Name of Employer None Occupation Homemaker

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017

Transaction ID : **C10912956**

Amount of Each Receipt this Period  
 2500.00

Memo Item

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

Mailing Address 240 E 47th St  
Apt 39D

City New York State NY Zip Code 10017-2140

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

Name of Employer Contrarian Capital Occupation Finance

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017

Transaction ID : **C10912957**

Amount of Each Receipt this Period  
 2500.00

Memo Item

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

Mailing Address 116 Llanfair Rd

City Ardmore State PA Zip Code 19003-2501

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

Name of Employer John A. Steer Co. Occupation Logistics Executive

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  
 09 / 07 / 2017

Transaction ID : **C10910211**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00

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

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

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

FOR LINE NUMBER: PAGE 32 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Wagner, Avi, , ,**

Mailing Address 1925 Century Park E  
Ste 2100

City Los Angeles State CA Zip Code 90067-2722

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2017

Transaction ID : **C10909232**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 4141 Colbath Ave

City Sherman Oaks State CA Zip Code 91423-4207

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

Name of Employer Venable LLP Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2017

Transaction ID : **C10913417**

Amount of Each Receipt this Period  
2000.00

Memo Item

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

Mailing Address 502 W Allens Ln

City Philadelphia State PA Zip Code 19119-2806

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

Name of Employer Philly Office Retail Occupation President

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2017

Transaction ID : **C10909203**

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

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



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

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

FOR LINE NUMBER: PAGE 33 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Weiss, Jeff, , ,**

Mailing Address 16661 Huerta Rd

City Encino State CA Zip Code 91436-3546

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

Name of Employer Weiss Family Properties Occupation Real Estate Owner

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2017

Transaction ID : **C10909233**

Amount of Each Receipt this Period  
 750.00

Memo Item

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

Mailing Address 1500 Market St  
38th Fl

City Philadelphia State PA Zip Code 19102

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

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  
 08 / 01 / 2017

Transaction ID : **C10899998**

Amount of Each Receipt this Period  
 1000.00

Memo Item

PARTNERSHIP--partners below if itemized

**C.** Full Name (Last, First, Middle Initial)  
**Hayden, Richard, W., , Sr.**

Mailing Address 401 Green Ln

City Philadelphia State PA Zip Code 19128-3305

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

Name of Employer Saul Ewing LLP Occupation Partner

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  
 08 / 01 / 2017

Transaction ID : **C10899999**

Amount of Each Receipt this Period  
 1000.00

Memo Item

\*

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 34 OF 99	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Dilworth Paxson LLP**

Mailing Address 1500 Market St  
Ste 3500E

City Philadelphia	State PA	Zip Code 19102-2101
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FEC ID number of contributing federal political committee. **C**

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  
09 / 21 / 2017

**Transaction ID : C10912925**

Amount of Each Receipt this Period  
1000.00

Memo Item

PARTNERSHIP--partners below if itemized

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

Mailing Address 1500 Market St  
Ste 3500E

City Philadelphia	State PA	Zip Code 19102-2101
----------------------	-------------	------------------------

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

Name of Employer Dilworth Paxson	Occupation Attorney
-------------------------------------	------------------------

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  
09 / 21 / 2017

**Transaction ID : C10912946**

Amount of Each Receipt this Period  
1000.00

Memo Item

\*

**C.** Full Name (Last, First, Middle Initial)  
**Obermayer Rebmann Maxwell & Hippel LLP**

Mailing Address 1617 John F Kennedy Blvd  
Fl 19

City Philadelphia	State PA	Zip Code 19103-1833
----------------------	-------------	------------------------

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

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2017

**Transaction ID : C10912943**

Amount of Each Receipt this Period  
2700.00

Memo Item

PARTNERSHIP--partners below if itemized

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3700.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 35 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Leonard, Thomas, A., ,**

Mailing Address 1617 John F Kennedy Blvd  
FI 19

City Philadelphia State PA Zip Code 19103-1833

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

Name of Employer Obermayer Rebmann Maxwell & Hippel LLP Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2017

Transaction ID : **C10912944**

Amount of Each Receipt this Period  
2700.00

Memo Item  
\*

**B.** Full Name (Last, First, Middle Initial)  
**Stradley Ronon Stevens & Young, LLP**

Mailing Address 2005 Market St  
Ste 2600

City Philadelphia State PA Zip Code 19103-7018

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

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  
09 / 21 / 2017

Transaction ID : **C10912951**

Amount of Each Receipt this Period  
1000.00

Memo Item

PARTNERSHIP--partners below if itemized

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

Mailing Address 2005 Market St  
Ste 2600

City Philadelphia State PA Zip Code 19103-7018

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

Name of Employer Occupation  
Stradley Ronan Chairman

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  
09 / 21 / 2017

Transaction ID : **C10912952**

Amount of Each Receipt this Period  
1000.00

Memo Item  
\*

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

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

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

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

FOR LINE NUMBER: PAGE 36 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Baker, D J, , ,**

Mailing Address 885 Third Avenue Suite 1000

City New York State NY Zip Code 10022

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

Name of Employer Latham & Watkins LLP Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2017

Transaction ID : **C10913143A**

Amount of Each Receipt this Period  
500.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3353.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2017

Transaction ID : **C10913143AB**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 936 Warfield Lane

City Huntingdon Valley State PA Zip Code 19006-3323

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

Name of Employer Occupation  
Self Self Employed

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
525.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2017

Transaction ID : **C10914112A**

Amount of Each Receipt this Period  
25.00

Memo Item

\* Earmarked Contribution: See Below

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

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

525.00

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

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

FOR LINE NUMBER: PAGE 37 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**ActBlue Technical Services**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3353.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2017

**Transaction ID : C10914112AB**

Amount of Each Receipt this Period  
25.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 2205 Washington Lane

City Huntingdon Valley State PA Zip Code 19006

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

Name of Employer Occupation  
EHI Executive

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2017

**Transaction ID : C10908437A**

Amount of Each Receipt this Period  
500.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3353.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2017

**Transaction ID : C10908437AB**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

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

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

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

FOR LINE NUMBER: PAGE 38 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Kovnat, Karel, , ,**  
 Mailing Address 430 Vernon Road  
 City Jenkintown State PA Zip Code 19046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Adler Institute for Advanced Imaging Occupation Psychologist  
 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  
 07 / 12 / 2017  
**Transaction ID : C10899980A**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**ActBlue Technical Services**  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation Conduit total listed in Agg. field  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3353.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2017  
**Transaction ID : C10899980AB**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**McHugh, Patrick, , ,**  
 Mailing Address 1721 Ferndale Ave  
 City Abington State PA Zip Code 19001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Attorney  
 Self  
 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  
 07 / 31 / 2017  
**Transaction ID : C10908434A**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 \* Earmarked Contribution: See Below

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

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

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

FOR LINE NUMBER: PAGE 39 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**ActBlue Technical Services**  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3353.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2017  
**Transaction ID : C10908434AB**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Schorsch, Peter, , ,**  
 Mailing Address 261 Old York Rd suite 410  
 City Jenkintown State PA Zip Code 19046-3701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DEP CEO  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2017  
**Transaction ID : C10914089A**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**ActBlue Technical Services**  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3353.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2017  
**Transaction ID : C10914089AB**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 100.00  
**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 40 OF 99	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Rubin, Anne, , ,**

Mailing Address 212 Linden Drive

City Elkins Park	State PA	Zip Code 19027
---------------------	-------------	-------------------

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

Name of Employer Century 21 Advantage Gold	Occupation Associate Broker
---	--------------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

**Transaction ID : C10914074A**

Amount of Each Receipt this Period  
500.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO BOX 2713

City ALEXANDRIA	State VA	Zip Code 22301
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00484535

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

**Transaction ID : C10914074AB**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

**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
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Amount of Each Receipt this Period

Memo Item

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

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

500.00
97525.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**ABBVIE POLITICAL ACTION COMMITTEE**

Mailing Address 1 N. WAUKEGAN ROAD

City NORTH CHICAGO	State IL	Zip Code 60064
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00536573

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2017

**Transaction ID : C10910008**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AIR LINE PILOTS ASSOCIATION PAC**

Mailing Address 1625 MASSACHUSETTS AVE. NW

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00035451

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2017

**Transaction ID : C10914053**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AIR PRODUCTS AND CHEMICALS, INC. POLITICAL ALLIANCE**

Mailing Address P.O. BOX 441

City TRELERTOWN	State PA	Zip Code 18087
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00127258

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  
 08 / 01 / 2017

**Transaction ID : C10899986**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 3500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 42 OF 99	
<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)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)

Mailing Address 222 SOUTH PROSPECT AVE  
C/O FINANCE DEPARTMENT

City PARK RIDGE State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2017

**Transaction ID : C10912947**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 1275 PENNSYLVANIA AVE NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00100107

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  
09 / 30 / 2017

**Transaction ID : C10914054**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1891 PRESTON WHITE DRIVE

City RESTON State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2017

**Transaction ID : C10914055**

Amount of Each Receipt this Period  
2000.00

Memo Item

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1111 14TH STREET, NW  
SUITE 1100

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00000729

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  
09 / 21 / 2017

**Transaction ID : C10912920**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN FEDERATION OF GOVT. EMPL. POLITICAL ACTION COMMITTEE**

Mailing Address 80 F STREET, NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00009936

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 19 / 2017

**Transaction ID : C10912849**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN HOSPITAL ASSOCIATION PAC**

Mailing Address 800 TENTH STREET, NW  
TWO CITYCENTER, SUITE 400

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00106146

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2017

**Transaction ID : C10914058**

Amount of Each Receipt this Period  
3000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES APAC**

Mailing Address 1575 I St NW

City Washington	State DC	Zip Code 20005-1105
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00041566

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2017

**Transaction ID : C10910009**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN SUGAR CANE LEAGUE OF USA INC POLITICAL ACTION COMMITTEE**

Mailing Address P. O. DRAWER 938

City THIBODAU	State LA	Zip Code 70302
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00081414

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  
 08 / 01 / 2017

**Transaction ID : C10899987**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN TRAFFIC SAFETY SERVICES ASSOCIATION PAC**

Mailing Address 15 Riverside Pkwy  
Ste 100

City Fredericksburg	State VA	Zip Code 22406-1077
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00281717

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  
 09 / 30 / 2017

**Transaction ID : C10914059**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	_____ 2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)

Mailing Address 1300 Morris Dr  
Ste 100

City Chesterbrook State PA Zip Code 19087-5559

FEC ID number of contributing federal political committee. **C** C00400929

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2017

**Transaction ID : C10899988**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
ARKEMA POLITICAL ACTION COMMITTEE

Mailing Address 900 FIRST AVE

City KING OF PRUSSIA State PA Zip Code 19406

FEC ID number of contributing federal political committee. **C** C00182980

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  
08 / 10 / 2017

**Transaction ID : C10908428**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 208 S. AKARD STREET  
SUITE 2701

City DALLAS State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2017

**Transaction ID : C10912921**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**AUTO CARE ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 7101 WISCONSIN AVENUE  
SUITE 1300

City BETHESDA	State MD	Zip Code 20814
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00250753

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 29 / 2017

**Transaction ID : C10910010**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Mailing Address 123 S FRONT ST

City MEMPHIS	State TN	Zip Code 38103
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00233056

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

**Transaction ID : C10916013**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BROTHERHOOD OF LOCOMOTIVE ENGINEERS AND TRAINMEN PAC FUND**

Mailing Address 1370 ONTARIO ST

City CLEVELAND	State OH	Zip Code 44113
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00099234

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 25 / 2017

**Transaction ID : C10898893**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	12500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 47 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**C.H. ROBINSON WORLDWIDE INC. PAC**

Mailing Address 14701 CHARLSON ROAD

City EDEN PRAIRIE State MN Zip Code 55347

FEC ID number of contributing federal political committee. **C** C00512673

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2017

**Transaction ID : C1089989**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CIGNA CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 601 PENNSYLVANIA AVENUE NW  
SOUTH BUILDING SUITE 835

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00085316

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2017

**Transaction ID : C10913139**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL**

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2017

**Transaction ID : C10914061**

Amount of Each Receipt this Period  
2500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial)  
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

**A.** Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00023580

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  
09 / 29 / 2017

**Transaction ID : C10914070**

Amount of Each Receipt this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**COZEN O'CONNOR POLITICAL ACTION COMMITTEE**

**B.** Mailing Address 1900 MARKET STREET

City PHILADELPHIA	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00312777

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  
09 / 30 / 2017

**Transaction ID : C10914062**

Amount of Each Receipt this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**DAY & ZIMMERMANN INC FEDERAL PAC (AKA 'DAYPAC - FEDERAL')**

**C.** Mailing Address 1500 SPRING GARDEN STREET

City PHILADELPHIA	State PA	Zip Code 19130
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00341271

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 26 / 2017

**Transaction ID : C10899990**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**DUANE MORRIS GOVERNMENT COMMITTEE**

Mailing Address 30 S 17th St

City Philadelphia	State PA	Zip Code 19103-4016
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00364133

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017

**Transaction ID : C10912929**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

Memo Item

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

Mailing Address PO BOX 66005

City WASHINGTON	State DC	Zip Code 20035
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00573261

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2017

**Transaction ID : C10908427**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ENDO PHARMACEUTICALS INC POLITICAL ACTION COMMITTEE (ENDO PAC)**

Mailing Address 1400 ATWATER DRIVE

City MALVERN	State PA	Zip Code 19355
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00452052

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2017

**Transaction ID : C10912274**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 5000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**GENESIS HEALTHCARE INC PAC**

Mailing Address 101 EAST STATE STREET

City KENNETT SQUARE	State PA	Zip Code 19348
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00292094

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017

**Transaction ID : C10912932**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**INDEPENDENCE BLUE CROSS PAC (IBC PAC)**

Mailing Address 1901 MARKET STREET

City PHILADELPHIA	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00450056

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017

**Transaction ID : C10912936**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1350.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**INDEPENDENCE BLUE CROSS PAC (IBC PAC)**

Mailing Address 1901 MARKET STREET

City PHILADELPHIA	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00450056

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2017

**Transaction ID : C10912937**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1350.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	_____ 3700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1615 L STREET, NW  
SUITE 900

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00032698

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  
08 / 01 / 2017

Transaction ID : C1089992

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC

Mailing Address 1750 NEW YORK AVE NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2017

Transaction ID : C1089991

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION AFL-CIO COMMITTEE ON POLITICAL EDUCATION

Mailing Address 5000 W Side Ave

City North Bergen State NJ Zip Code 07047-6439

FEC ID number of contributing federal political committee. **C** C00158576

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 23 / 2017

Transaction ID : C10908968

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE**

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00105981

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  
 08 / 01 / 2017

**Transaction ID : C10899993**

Amount of Each Receipt this Period  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LEAGUE OF CONSERVATION VOTERS ACTION FUND**

Mailing Address 1920 L ST NW SUITE 800

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00252940

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2017

**Transaction ID : C10914066**

Amount of Each Receipt this Period  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**LKQ CORPORATION EMPLOYEE GOOD GOVERNMENT FUND**

Mailing Address 500 WEST MADISON STREET  
SUITE 2800

City CHICAGO	State IL	Zip Code 60661
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00458158

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  
 09 / 19 / 2017

**Transaction ID : C10912850**

Amount of Each Receipt this Period  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ , _____ , _____ 2500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____ , _____ , _____

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

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

FOR LINE NUMBER: PAGE 53 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Malady & Wooten PAC**

Mailing Address 604 N 3rd Street

City Harrisburg State PA Zip Code 17101

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

Name of Employer Occupation

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  
 09 / 30 / 2017

**Transaction ID : C10914069**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

Mailing Address 606 NORTH WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00091561

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2017

**Transaction ID : C10914071**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL AUTOMOBILE DEALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 8400 WESTPARK DRIVE

City TYSONS State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 19 / 2017

**Transaction ID : C10912851**

Amount of Each Receipt this Period  
4000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5250.00

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

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

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

FOR LINE NUMBER: PAGE 54 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1101 KING STREET  
SUITE 600

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2017

**Transaction ID : C10912275**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL TREASURY EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address 1750 H STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00107128

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  
 09 / 30 / 2017

**Transaction ID : C10914076**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)**

Mailing Address 601 PENNSYLVANIA AVENUE NW  
SUITE 800 NORTH BLDG.

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00361758

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2017

**Transaction ID : C10914075**

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1200 WILSON BLVD

City ARLINGTON	State VA	Zip Code 22209
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00142711

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2017

**Transaction ID : C10914060**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION COMMITTEE FOR RURAL ELECTRIFICA**

Mailing Address 4301 WILSON BOULEVARD

City ARLINGTON	State VA	Zip Code 22203
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00002972

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2017

**Transaction ID : C10914052**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC**

Mailing Address 601 THIRTEENTH STREET NW  
STE 910 S

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00542365

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2017

**Transaction ID : C10912953**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE**

Mailing Address 501 THIRD ST. NW 9TH FLOOR

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00008268

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  
 09 / 25 / 2017

**Transaction ID : C10913140**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

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

Mailing Address 1625 PRINCE ST SUITE 200

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00335091

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2017

**Transaction ID : C10900000**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**UNITED MINE WORKERS OF AMERICA POWER PAC**

Mailing Address 18354 QUANTICO GATEWAY DRIVE #200

City TRIANGLE	State VA	Zip Code 22172
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00489203

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2017

**Transaction ID : C10910014**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 6000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____



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

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

FOR LINE NUMBER: PAGE 57 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**UNIVERSAL HEALTH SERVICES EMPLOYEES' GOOD GOVERNMENT FUND**

Mailing Address 367 SOUTH GULPH ROAD

City KING OF PRUSSIA State PA Zip Code 19406

FEC ID number of contributing federal political committee. **C** C00185520

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2017

**Transaction ID : C1089892**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB (VERIZON PAC)**

Mailing Address 1300 I ST NW, STE 400 WEST  
ATTN: TAYLOR CRAIG

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00186288

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  
 09 / 25 / 2017

**Transaction ID : C10913142**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WESTINGHOUSE ELECTRIC COMPANY LLC PAC**

Mailing Address 900 19TH STREET, NW  
SUITE 350

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00346361

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  
 07 / 25 / 2017

**Transaction ID : C10898896**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

4500.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00147173

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 19 / 2017

**Transaction ID : C10912852**

Amount of Each Receipt this Period

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="2500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="85450.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Boyle**

**A.** Full Name (Last, First, Middle Initial)  
**Capital One Bank**

Mailing Address 336 Pennsylvania Ave

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
694.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 31 / 2017

**Transaction ID : C10914080**

Amount of Each Receipt this Period  
64.52

Memo Item

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

Mailing Address 336 Pennsylvania Ave

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
694.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 31 / 2017

**Transaction ID : C10914081**

Amount of Each Receipt this Period  
64.53

Memo Item

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

Mailing Address 336 Pennsylvania Ave

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
694.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2017

**Transaction ID : C10914082**

Amount of Each Receipt this Period  
62.46

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	191.51
<b>TOTAL</b> This Period (last page this line number only).....▶	191.51

**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 60 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2017		
Mailing Address P.O. Box 619616, MD 5675			FEC Identification Number C		
City Dallas	State TX	Zip Code 75261	Amount of Each Disbursement this Period 238.20		
Purpose of Disbursement Travel Expense		Category/Type	Transaction ID : D548364		
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>B. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2017		
Mailing Address P.O. Box 619616, MD 5675			FEC Identification Number C		
City Dallas	State TX	Zip Code 75261	Amount of Each Disbursement this Period 307.20		
Purpose of Disbursement Travel Expense		Category/Type	Transaction ID : D548366		
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>C. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2017		
Mailing Address P.O. Box 619616, MD 5675			FEC Identification Number C		
City Dallas	State TX	Zip Code 75261	Amount of Each Disbursement this Period 183.20		
Purpose of Disbursement Travel Expense		Category/Type	Transaction ID : D548367		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	728.60
<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 61 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2017
Mailing Address P.O. Box 619616, MD 5675		FEC Identification Number C
City Dallas	State TX	Zip Code 75261
Purpose of Disbursement Travel Expense		Amount of Each Disbursement this Period 24.76
Candidate Name	Category/ Type	Transaction ID : D548368
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>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2017
Mailing Address P.O. Box 619616, MD 5675		FEC Identification Number C
City Dallas	State TX	Zip Code 75261
Purpose of Disbursement Travel Expense		Amount of Each Disbursement this Period 172.20
Candidate Name	Category/ Type	Transaction ID : D548369
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>C. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2017
Mailing Address P.O. Box 619616, MD 5675		FEC Identification Number C
City Dallas	State TX	Zip Code 75261
Purpose of Disbursement Travel Expense		Amount of Each Disbursement this Period 172.20
Candidate Name	Category/ Type	Transaction ID : D548370
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	369.16
<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 62 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2017		
Mailing Address P.O. Box 619616, MD 5675			FEC Identification Number <b>C</b>		
City Dallas	State TX	Zip Code 75261	Amount of Each Disbursement this Period 172.20		
Purpose of Disbursement Travel Expense		Category/ Type	Transaction ID : <b>D548371</b>		
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>B. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2017		
Mailing Address P.O. Box 619616, MD 5675			FEC Identification Number <b>C</b>		
City Dallas	State TX	Zip Code 75261	Amount of Each Disbursement this Period 103.20		
Purpose of Disbursement Travel Expense		Category/ Type	Transaction ID : <b>D548372</b>		
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>C. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2017		
Mailing Address P.O. Box 619616, MD 5675			FEC Identification Number <b>C</b>		
City Dallas	State TX	Zip Code 75261	Amount of Each Disbursement this Period 346.41		
Purpose of Disbursement Travel Expense		Category/ Type	Transaction ID : <b>D549096</b>		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	621.81
<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 63 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Ampro Sports</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2017
Mailing Address 30 Bunting Lane		FEC Identification Number C
City Clifton Heights	State PA	Zip Code 19018
Purpose of Disbursement Campaign T-Shirts		Amount of Each Disbursement this Period 381.00
Candidate Name		Transaction ID : D548353
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>B. Angerholzer Broz Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2017
Mailing Address 499 S Capitol St SW Ste 422		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4028
Purpose of Disbursement Fundraising Fee		Amount of Each Disbursement this Period 4500.00
Candidate Name		Transaction ID : D548282
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>c. Angerholzer Broz Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2017
Mailing Address 499 S Capitol St SW Ste 422		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4028
Purpose of Disbursement Bookkeeping		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : D548283
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5881.00
<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 64 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Angerholzer Broz Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2017
Mailing Address 499 S Capitol St SW Ste 422		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4028
Purpose of Disbursement Telephone Expense		Amount of Each Disbursement this Period 25.00
Candidate Name		Transaction ID : D548284
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>B. Angerholzer Broz Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2017
Mailing Address 499 S Capitol St SW Ste 422		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4028
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 0.92
Candidate Name		Transaction ID : D548285
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>c. Angerholzer Broz Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2017
Mailing Address 499 S Capitol St SW Ste 422		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4028
Purpose of Disbursement Parking		Amount of Each Disbursement this Period 5.05
Candidate Name		Transaction ID : D548286
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	30.97
<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 65 OF 99	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Angerholzer Broz Consulting, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2017	
Mailing Address 499 S Capitol St SW Ste 422			FEC Identification Number <b>C</b>	
City Washington	State DC	Zip Code 20003-4028	Amount of Each Disbursement this Period 83.72	
Purpose of Disbursement Fundraiser Event Catering		Category/ Type	Transaction ID : <b>D548287</b>	
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>B. Angerholzer Broz Consulting, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2017	
Mailing Address 499 S Capitol St SW Ste 422			FEC Identification Number <b>C</b>	
City Washington	State DC	Zip Code 20003-4028	Amount of Each Disbursement this Period 10.52	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : <b>D548288</b>	
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>c. Angerholzer Broz Consulting, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2017	
Mailing Address 499 S Capitol St SW Ste 422			FEC Identification Number <b>C</b>	
City Washington	State DC	Zip Code 20003-4028	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement Fundraising Fee		Category/ Type	Transaction ID : <b>D548289</b>	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4594.24
<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 66 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Angerholzer Broz Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2017
Mailing Address 499 S Capitol St SW Ste 422		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4028
Purpose of Disbursement Bookkeeping	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
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) ▼	Transaction ID : D548290
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Angerholzer Broz Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2017
Mailing Address 499 S Capitol St SW Ste 422		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4028
Purpose of Disbursement Compliance Fee	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 500.00	
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) ▼	Transaction ID : D548291
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Angerholzer Broz Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2017
Mailing Address 499 S Capitol St SW Ste 422		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4028
Purpose of Disbursement Telephone Expense	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 25.00	
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) ▼	Transaction ID : D548292
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1525.00
<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 67 OF 99	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Angerholzer Broz Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2017
Mailing Address 499 S Capitol St SW Ste 422		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4028
Purpose of Disbursement Travel Expense	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 7.65	
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) ▼	
State: District:	Transaction ID : D548293 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Angerholzer Broz Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2017
Mailing Address 499 S Capitol St SW Ste 422		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4028
Purpose of Disbursement Travel Expense	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 9.32	
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 : D548294 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Bistro Bis</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2017
Mailing Address 15 E Street NW		FEC Identification Number C
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Fundraiser Catering Expense	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 755.20	
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 : D549061 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	772.17
<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 68 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Bluejacket</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2017
Mailing Address 300 Tingey Street SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Fundraiser Catering Expense		Amount of Each Disbursement this Period 335.40
Candidate Name		Transaction ID : D549060
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>B. Bobby Van?s Steakhouse</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2017
Mailing Address 809 15th Street, NW		FEC Identification Number C
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Fundraiser Catering Expense		Amount of Each Disbursement this Period 731.64
Candidate Name		Transaction ID : D548297
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>c. Boyle, Brendan, , Rep,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2017
Mailing Address 15040 Kelvin Ave.		FEC Identification Number C H4PA13199
City Philadelphia	State PA	Zip Code 19116
Purpose of Disbursement Travel Reimbursement		Amount of Each Disbursement this Period 95.00
Candidate Name <b>Boyle, Brendan, , Rep,</b>		Transaction ID : D548346
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA	District: 13	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1162.04
<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 69 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Brulee Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2017
Mailing Address Independence Visitor Center 6th and Market Streets		FEC Identification Number C
City Philadelphia	State PA	Zip Code 19106
Purpose of Disbursement Fundraiser Catering Expense		Amount of Each Disbursement this Period 1967.32
Candidate Name		Transaction ID : D548300
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>B. Brulee Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2017
Mailing Address Independence Visitor Center 6th and Market Streets		FEC Identification Number C
City Philadelphia	State PA	Zip Code 19106
Purpose of Disbursement Fundraiser Catering Expense		Amount of Each Disbursement this Period 3262.79
Candidate Name		Transaction ID : D549036
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>c. Bullfeathers</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2017
Mailing Address 410 First Street SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Fundraiser Catering Expense		Amount of Each Disbursement this Period 157.43
Candidate Name		Transaction ID : D548296
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5387.54
<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 70 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Chef's Table</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2017	
Mailing Address 231 South Street			FEC Identification Number C	
City Philadelphia	State PA	Zip Code 19147	Amount of Each Disbursement this Period 505.72	
Purpose of Disbursement Fundraiser Catering Expense		Category/ Type	Transaction ID : D548299	
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>B. Chicago Limo 66</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2017	
Mailing Address 10104 Hartford Court			FEC Identification Number C	
City Schiller Park	State IL	Zip Code 60176	Amount of Each Disbursement this Period 207.40	
Purpose of Disbursement Travel Expense		Category/ Type	Transaction ID : D549095	
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>C. Comcast</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2017	
Mailing Address PO Box 3002			FEC Identification Number C	
City Southeastern	State PA	Zip Code 19398	Amount of Each Disbursement this Period 85.53	
Purpose of Disbursement Internet		Category/ Type	Transaction ID : D549066	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	798.65
<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 71 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Comcast</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2017		
Mailing Address PO Box 3002			FEC Identification Number C		
City Southeastern	State PA	Zip Code 19398	Amount of Each Disbursement this Period 85.53		
Purpose of Disbursement Internet		Category/ Type	Transaction ID : D548337		
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>B. Comcast</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2017		
Mailing Address PO Box 3002			FEC Identification Number C		
City Southeastern	State PA	Zip Code 19398	Amount of Each Disbursement this Period 85.53		
Purpose of Disbursement Internet		Category/ Type	Transaction ID : D548338		
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>C. Delta Air Lines</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2017		
Mailing Address P.O. Box 20706			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30320	Amount of Each Disbursement this Period 18.00		
Purpose of Disbursement Travel Expense		Category/ Type	Transaction ID : D548379		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	189.06
<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 72 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Delta Air Lines</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2017		
Mailing Address P.O. Box 20706			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30320	Amount of Each Disbursement this Period 462.80		
Purpose of Disbursement Travel Expense		Category/Type	Transaction ID : D548380		
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>B. Dwyer, Erin, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2017		
Mailing Address 11719 Stevens Road			FEC Identification Number C		
City Philadelphia	State PA	Zip Code 19116	Amount of Each Disbursement this Period 25.59		
Purpose of Disbursement Payroll		Category/Type	Transaction ID : D549074		
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>C. Dwyer, Erin, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2017		
Mailing Address 11719 Stevens Road			FEC Identification Number C		
City Philadelphia	State PA	Zip Code 19116	Amount of Each Disbursement this Period 264.93		
Purpose of Disbursement Payroll		Category/Type	Transaction ID : D548351		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	753.32
<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 73 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Dwyer, Erin, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2017	
Mailing Address 11719 Stevens Road			FEC Identification Number C	
City Philadelphia	State PA	Zip Code 19116	Amount of Each Disbursement this Period 144.42	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : D548352	
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>B. E-Z Pass</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2017	
Mailing Address 7631 Derry Street			FEC Identification Number C	
City Harrisburg	State PA	Zip Code 17111	Amount of Each Disbursement this Period 105.00	
Purpose of Disbursement Automobile Expense		Category/ Type	Transaction ID : D548279	
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>c. Enterprise Rent-A-Car</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2017	
Mailing Address 8583 Santa Monica Boulevard			FEC Identification Number C	
City West Hollywood	State CA	Zip Code 90069	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement Automobile Expense		Category/ Type	Transaction ID : D548278	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	499.42
<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 74 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Enterprise Rent-A-Car</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2017
Mailing Address 8583 Santa Monica Boulevard		FEC Identification Number C
City West Hollywood	State CA	Zip Code 90069
Purpose of Disbursement Automobile Expense		Amount of Each Disbursement this Period 14.00
Candidate Name		Transaction ID : D548378
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>B. Esurance</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2017
Mailing Address P.O. Box 6476		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197
Purpose of Disbursement Automobile Insurance		Amount of Each Disbursement this Period 1154.00
Candidate Name		Transaction ID : D548270
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>C. FirstData</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2017
Mailing Address 5565 Glenridge Connector NE Ste 2000		FEC Identification Number C
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fee		Amount of Each Disbursement this Period 57.62
Candidate Name		Transaction ID : D548304
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1225.62
<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 75 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. FirstData</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2017
Mailing Address 5565 Glenridge Connector NE Ste 2000		FEC Identification Number C
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fee	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 25.15	
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 : D548305
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. FirstData</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2017
Mailing Address 5565 Glenridge Connector NE Ste 2000		FEC Identification Number C
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fee	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 14.48	
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 : D548306
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. FirstData</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2017
Mailing Address 5565 Glenridge Connector NE Ste 2000		FEC Identification Number C
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fee	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 43.68	
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 : D548307
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	83.31
<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 76 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. FirstData</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2017		
Mailing Address 5565 Glenridge Connector NE Ste 2000			FEC Identification Number <b>C</b>		
City Atlanta	State GA	Zip Code 30342-1651	Amount of Each Disbursement this Period 40.94		
Purpose of Disbursement Merchant Bank Fee		Category/ Type	Transaction ID : <b>D548308</b>		
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>B. FirstData</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2017		
Mailing Address 5565 Glenridge Connector NE Ste 2000			FEC Identification Number <b>C</b>		
City Atlanta	State GA	Zip Code 30342-1651	Amount of Each Disbursement this Period 24.81		
Purpose of Disbursement Merchant Bank Fee		Category/ Type	Transaction ID : <b>D548309</b>		
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>C. FirstData</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2017		
Mailing Address 5565 Glenridge Connector NE Ste 2000			FEC Identification Number <b>C</b>		
City Atlanta	State GA	Zip Code 30342-1651	Amount of Each Disbursement this Period 374.95		
Purpose of Disbursement Merchant Bank Fee		Category/ Type	Transaction ID : <b>D549041</b>		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	440.70
<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 77 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. FirstData</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2017
Mailing Address 5565 Glenridge Connector NE Ste 2000		FEC Identification Number C
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fee		Amount of Each Disbursement this Period 343.20
Candidate Name	Category/Type	Transaction ID : D549042
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>B. FirstData</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2017
Mailing Address 5565 Glenridge Connector NE Ste 2000		FEC Identification Number C
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fee		Amount of Each Disbursement this Period 31.60
Candidate Name	Category/Type	Transaction ID : D549043
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>c. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2017
Mailing Address PO Box 542000		FEC Identification Number C
City Omaha	State NE	Zip Code 68154-8000
Purpose of Disbursement Automobile Lease		Amount of Each Disbursement this Period 789.00
Candidate Name	Category/Type	Transaction ID : D549024
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1163.80
<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 78 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2017
Mailing Address PO Box 542000		FEC Identification Number C
City Omaha	State NE	Zip Code 68154-8000
Purpose of Disbursement Automobile Lease	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 569.00	
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) ▼	Transaction ID : D548280
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2017
Mailing Address PO Box 542000		FEC Identification Number C
City Omaha	State NE	Zip Code 68154-8000
Purpose of Disbursement Automobile Lease	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 569.00	
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) ▼	Transaction ID : D548281
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Giftcards.com</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2017
Mailing Address 680 Andersen Drive Suite 430		FEC Identification Number C
City Pittsburgh	State PA	Zip Code 15220
Purpose of Disbursement Gifts Given	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 305.67	
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 : D548301
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1443.67
<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 79 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Google Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2017
Mailing Address 1600 Amphitheater Parkway		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Email Hosting		Amount of Each Disbursement this Period 70.00
Candidate Name	Category/ Type	Transaction ID : D548302
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>B. Google Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2017
Mailing Address 1600 Amphitheater Parkway		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Email Hosting		Amount of Each Disbursement this Period 69.03
Candidate Name	Category/ Type	Transaction ID : D548303
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>c. Google Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2017
Mailing Address 1600 Amphitheater Parkway		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Email Hosting		Amount of Each Disbursement this Period 65.00
Candidate Name	Category/ Type	Transaction ID : D549040
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	204.03
<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 80 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. GovPredict.com</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2017
Mailing Address 444 N Capitol St. NW		FEC Identification Number <b>C</b>
City Washington	State DC	
Purpose of Disbursement Campaign Software		Amount of Each Disbursement this Period 595.00
Candidate Name		
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 : <b>D549076</b> <input type="checkbox"/> Memo Item
State: _____ District: _____	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. GovPredict.com</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2017
Mailing Address 444 N Capitol St. NW		FEC Identification Number <b>C</b>
City Washington	State DC	
Purpose of Disbursement Campaign Software		Amount of Each Disbursement this Period 595.00
Candidate Name		
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 : <b>D548356</b> <input type="checkbox"/> Memo Item
State: _____ District: _____	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. GovPredict.com</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2017
Mailing Address 444 N Capitol St. NW		FEC Identification Number <b>C</b>
City Washington	State DC	
Purpose of Disbursement Campaign Software		Amount of Each Disbursement this Period 595.00
Candidate Name		
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 : <b>D548357</b> <input type="checkbox"/> Memo Item
State: _____ District: _____	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1785.00
<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 81 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Green Valley Country Club</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2017		
Mailing Address 201 Ridge Pike			FEC Identification Number C		
City Lafayette Hill	State PA	Zip Code 19444	Amount of Each Disbursement this Period 991.76		
Purpose of Disbursement Fundraiser Catering Expense		Category/ Type	Transaction ID : D548298		
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>B. Heppard, Scott, H, Mr.,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2017		
Mailing Address 225 Loring Ct			FEC Identification Number C		
City Sewell	State NJ	Zip Code 08080-3005	Amount of Each Disbursement this Period 873.35		
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : D548347		
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>c. Heppard, Scott, H, Mr.,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2017		
Mailing Address 225 Loring Ct			FEC Identification Number C		
City Sewell	State NJ	Zip Code 08080-3005	Amount of Each Disbursement this Period 873.34		
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : D548349		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2738.45
<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 82 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Heppard, Scott, H, Mr.,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2017	
Mailing Address 225 Loring Ct			FEC Identification Number C	
City Sewell	State NJ	Zip Code 08080-3005	Amount of Each Disbursement this Period 873.34	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : D548350	
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>B. Hotels.com</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2017	
Mailing Address 5400 LBJ Freeway, Suite 500			FEC Identification Number C	
City Dallas	State TX	Zip Code 75240	Amount of Each Disbursement this Period 1426.48	
Purpose of Disbursement Travel Expense		Category/ Type	Transaction ID : D548358	
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>C. L&amp;M Promotions LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2017	
Mailing Address 8216 Roseland Drive			FEC Identification Number C	
City Fairfax Station	State VA	Zip Code 22039	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement Fundraiser Event Venue		Category/ Type	Transaction ID : D549026	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6799.82
<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 83 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Morris Inn</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2017		
Mailing Address 130 Morris Inn			FEC Identification Number C		
City Notre Dame	State IN	Zip Code 46556	Amount of Each Disbursement this Period 1612.47		
Purpose of Disbursement Travel Expense		Category/ Type	Transaction ID : D549079		
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>B. National Constitution Center</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2017		
Mailing Address 525 Arch Street			FEC Identification Number C		
City Philadelphia	State PA	Zip Code 19106	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement Fundraiser Venue Expense		Category/ Type	Transaction ID : D549037		
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>C. NGP VAN Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2017		
Mailing Address 1101 15th St. NW			FEC Identification Number C		
City Washington	State DC	Zip Code 20005	Amount of Each Disbursement this Period 850.00		
Purpose of Disbursement Software		Category/ Type	Transaction ID : D549075		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4462.47
<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 84 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2017	
Mailing Address 1101 15th St. NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20005	Amount of Each Disbursement this Period 850.00	
Purpose of Disbursement Software		Category/ Type	Transaction ID : D548354	
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>B. NGP VAN Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2017	
Mailing Address 1101 15th St. NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20005	Amount of Each Disbursement this Period 850.00	
Purpose of Disbursement Software		Category/ Type	Transaction ID : D548355	
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>c. Paychex, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2017	
Mailing Address 911 Panorama Trl S			FEC Identification Number C	
City Rochester	State NY	Zip Code 14625-2311	Amount of Each Disbursement this Period 119.65	
Purpose of Disbursement Payroll Expense		Category/ Type	Transaction ID : D548342	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1819.65
<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 85 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2017		
Mailing Address 911 Panorama Trl S			FEC Identification Number C		
City Rochester	State NY	Zip Code 14625-2311	Amount of Each Disbursement this Period 83.86		
Purpose of Disbursement Payroll Expense		Category/ Type	Transaction ID : D548343		
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>B. Paychex, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2017		
Mailing Address 911 Panorama Trl S			FEC Identification Number C		
City Rochester	State NY	Zip Code 14625-2311	Amount of Each Disbursement this Period 405.73		
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : D548344		
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>C. Paychex, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2017		
Mailing Address 911 Panorama Trl S			FEC Identification Number C		
City Rochester	State NY	Zip Code 14625-2311	Amount of Each Disbursement this Period 514.21		
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : D548345		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1003.80
<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 86 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017	
Mailing Address 911 Panorama Trl S			FEC Identification Number C	
City Rochester	State NY	Zip Code 14625-2311	Amount of Each Disbursement this Period 83.65	
Purpose of Disbursement Payroll Expense		Category/ Type	Transaction ID : D549068	
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>B. Paychex, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017	
Mailing Address 911 Panorama Trl S			FEC Identification Number C	
City Rochester	State NY	Zip Code 14625-2311	Amount of Each Disbursement this Period 455.37	
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : D549069	
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>c. Paychex, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2017	
Mailing Address 911 Panorama Trl S			FEC Identification Number C	
City Rochester	State NY	Zip Code 14625-2311	Amount of Each Disbursement this Period 7.90	
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : D549070	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	546.92
<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 87 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. RingCentral, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2017		
Mailing Address 999 Baker Way, 5th Floor			FEC Identification Number C		
City San Mateo	State CA	Zip Code 94404	Amount of Each Disbursement this Period 66.44		
Purpose of Disbursement Telephone Expense		Category/ Type	Transaction ID : D549067		
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>B. RingCentral, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2017		
Mailing Address 999 Baker Way, 5th Floor			FEC Identification Number C		
City San Mateo	State CA	Zip Code 94404	Amount of Each Disbursement this Period 66.44		
Purpose of Disbursement Telephone Expense		Category/ Type	Transaction ID : D548339		
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>c. RingCentral, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2017		
Mailing Address 999 Baker Way, 5th Floor			FEC Identification Number C		
City San Mateo	State CA	Zip Code 94404	Amount of Each Disbursement this Period 66.44		
Purpose of Disbursement Telephone Expense		Category/ Type	Transaction ID : D548340		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	199.32
<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 88 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Solvere One LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2017	
Mailing Address 601 Pennsylvania Ave NW #900			FEC Identification Number C	
City Washington	State DC	Zip Code 20004	Amount of Each Disbursement this Period 866.71	
Purpose of Disbursement IT Services		Category/ Type	Transaction ID : D549039	
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>B. Sunoco</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2017	
Mailing Address P.O. Box 321			FEC Identification Number C	
City Essington	State PA	Zip Code 19029	Amount of Each Disbursement this Period 1.99	
Purpose of Disbursement Automobile Expense		Category/ Type	Transaction ID : D548271	
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>C. Sunoco</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2017	
Mailing Address P.O. Box 321			FEC Identification Number C	
City Essington	State PA	Zip Code 19029	Amount of Each Disbursement this Period 28.86	
Purpose of Disbursement Automobile Expense		Category/ Type	Transaction ID : D548272	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	897.56
<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 89 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2017
Mailing Address P.O. Box 321		FEC Identification Number C
City Essington	State PA	Zip Code 19029
Purpose of Disbursement Automobile Expense	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 25.90	
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 : D548273
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. The Liaison Capitol Hill</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2017
Mailing Address 415 New Jersey Avenue, NW		FEC Identification Number C
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Fundraiser Catering Expense	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2081.28	
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 : D549035
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. The Liaison Capitol Hill</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2017
Mailing Address 415 New Jersey Avenue, NW		FEC Identification Number C
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Fundraiser Catering Expense	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 750.00	
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) ▼	Transaction ID : D549031
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2857.18
<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 90 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2017
Mailing Address 1455 Market St 4th Fl		FEC Identification Number C
City San Francisco	State CA	Zip Code 94103
Purpose of Disbursement Travel Expense	Candidate Name	Amount of Each Disbursement this Period 4.00
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) ▼	Transaction ID : D549080
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017
Mailing Address 1455 Market St 4th Fl		FEC Identification Number C
City San Francisco	State CA	Zip Code 94103
Purpose of Disbursement Travel Expense	Candidate Name	Amount of Each Disbursement this Period 40.52
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 : D549081
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017
Mailing Address 1455 Market St 4th Fl		FEC Identification Number C
City San Francisco	State CA	Zip Code 94103
Purpose of Disbursement Travel Expense	Candidate Name	Amount of Each Disbursement this Period 26.49
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 : D549082
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	71.01
<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 91 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017		
Mailing Address 1455 Market St 4th Fl			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 6.26		
Purpose of Disbursement Travel Expense		Category/Type	Transaction ID : D549083		
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>B. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017		
Mailing Address 1455 Market St 4th Fl			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 6.19		
Purpose of Disbursement Travel Expense		Category/Type	Transaction ID : D549084		
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>c. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017		
Mailing Address 1455 Market St 4th Fl			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 6.89		
Purpose of Disbursement Travel Expense		Category/Type	Transaction ID : D549085		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	19.34
<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 92 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017	
Mailing Address 1455 Market St 4th Fl			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 7.71	
Purpose of Disbursement Travel Expense		Category/Type	Transaction ID : D549086	
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>B. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017	
Mailing Address 1455 Market St 4th Fl			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 5.00	
Purpose of Disbursement Travel Expense		Category/Type	Transaction ID : D549087	
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>c. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017	
Mailing Address 1455 Market St 4th Fl			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 5.74	
Purpose of Disbursement Travel Expense		Category/Type	Transaction ID : D549088	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	18.45
<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 93 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2017	
Mailing Address 1455 Market St 4th Fl			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 5.00	
Purpose of Disbursement Travel Expense		Category/ Type	Transaction ID : D549089	
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>B. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2017	
Mailing Address 1455 Market St 4th Fl			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 5.00	
Purpose of Disbursement Travel Expense		Category/ Type	Transaction ID : D549090	
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>c. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2017	
Mailing Address 1455 Market St 4th Fl			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 5.00	
Purpose of Disbursement Travel Expense		Category/ Type	Transaction ID : D549091	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15.00
<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 94 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2017
Mailing Address 1455 Market St 4th Fl		FEC Identification Number C
City San Francisco	State CA	Zip Code 94103
Purpose of Disbursement Travel Expense		Amount of Each Disbursement this Period 47.31
Candidate Name	Category/Type	Transaction ID : D549092
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>B. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2017
Mailing Address 1455 Market St 4th Fl		FEC Identification Number C
City San Francisco	State CA	Zip Code 94103
Purpose of Disbursement Travel Expense		Amount of Each Disbursement this Period 24.11
Candidate Name	Category/Type	Transaction ID : D549093
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>c. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2017
Mailing Address 1455 Market St 4th Fl		FEC Identification Number C
City San Francisco	State CA	Zip Code 94103
Purpose of Disbursement Travel Expense		Amount of Each Disbursement this Period 3.00
Candidate Name	Category/Type	Transaction ID : D548359
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	74.42
<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 95 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2017		
Mailing Address 1455 Market St 4th Fl			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 8.77		
Purpose of Disbursement Travel Expense		Category/Type	Transaction ID : D548360		
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>B. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2017		
Mailing Address 1455 Market St 4th Fl			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 7.88		
Purpose of Disbursement Travel Expense		Category/Type	Transaction ID : D548361		
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>c. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2017		
Mailing Address 1455 Market St 4th Fl			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94103	Amount of Each Disbursement this Period 26.28		
Purpose of Disbursement Travel Expense		Category/Type	Transaction ID : D548362		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	42.93
<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 96 OF 99
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2017
Mailing Address 233 South Wacker Drive		FEC Identification Number C
City Chicago	State IL	Zip Code 60606
Purpose of Disbursement Travel Expense	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 573.20	
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 : D548363
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2017
Mailing Address 233 South Wacker Drive		FEC Identification Number C
City Chicago	State IL	Zip Code 60606
Purpose of Disbursement Travel Expense	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 329.20	
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 : D548373
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2017
Mailing Address 10000 Roosevelt Blvd #4		FEC Identification Number C
City Philadelphia	State PA	Zip Code 19116
Purpose of Disbursement Telephone Expense	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 33.60	
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 : D548341
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	936.00
<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 97 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2017		
Mailing Address 10000 Roosevelt Blvd #4			FEC Identification Number C		
City Philadelphia	State PA	Zip Code 19116	Amount of Each Disbursement this Period 212.44		
Purpose of Disbursement Telephone Expense		Category/ Type	Transaction ID : D548335		
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>B. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2017		
Mailing Address 10000 Roosevelt Blvd #4			FEC Identification Number C		
City Philadelphia	State PA	Zip Code 19116	Amount of Each Disbursement this Period 243.48		
Purpose of Disbursement Telephone Expense		Category/ Type	Transaction ID : D548336		
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>C. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2017		
Mailing Address 10000 Roosevelt Blvd #4			FEC Identification Number C		
City Philadelphia	State PA	Zip Code 19116	Amount of Each Disbursement this Period 275.04		
Purpose of Disbursement Telephone Expense		Category/ Type	Transaction ID : D549065		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	730.96
<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 98 OF 99			
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2017		
Mailing Address 1300 I Street, NW Suite 500 East			FEC Identification Number C		
City Washington	State DC	Zip Code 20005	Amount of Each Disbursement this Period 4500.00		
Purpose of Disbursement Fundraiser Venue Expense		Category/ Type	Transaction ID : D548295		
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>B. Washington Nationals</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2017		
Mailing Address 1500 S Capitol Street, SE			FEC Identification Number C		
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2013.00		
Purpose of Disbursement Fundraiser Catering Expense		Category/ Type	Transaction ID : D549033		
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>c. Boyle, Brendan, , Rep,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2017		
Mailing Address 15040 Kelvin Ave.			FEC Identification Number C H4PA13199		
City Philadelphia	State PA	Zip Code 19116	Amount of Each Disbursement this Period 180.18		
Purpose of Disbursement Reimbursement		Category/ Type	Transaction ID : D549072		
Candidate Name <b>Boyle, Brendan, , Rep,</b>		<input type="checkbox"/> Memo Item			
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: PA District: 13					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6693.18
<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 99 OF 99	
	<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)  
**Citizens for Boyle**

Full Name (Last, First, Middle Initial) <b>A. Boyle, Brendan, , Rep,</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2017
Mailing Address 15040 Kelvin Ave.		FEC Identification Number C H4PA13199
City Philadelphia	State PA	Zip Code 19116
Purpose of Disbursement Online Storage Reimbursement		Amount of Each Disbursement this Period 107.99
Candidate Name <b>Boyle, Brendan, , Rep,</b>		Transaction ID : D549073
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: PA	District: 13	

Full Name (Last, First, Middle Initial) <b>B. Boyle, Brendan, , Rep,</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2017
Mailing Address 15040 Kelvin Ave.		FEC Identification Number C H4PA13199
City Philadelphia	State PA	Zip Code 19116
Purpose of Disbursement Office Supplies Reimbursement		Amount of Each Disbursement this Period 72.19
Candidate Name <b>Boyle, Brendan, , Rep,</b>		Transaction ID : D549071
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: PA	District: 13	

Full Name (Last, First, Middle Initial) <b>C.</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		Amount of Each Disbursement this Period
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House	Disbursement For:	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	59585.57