

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

| | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. NAME OF COMMITTEE IN FULL RYAN COSTELLO FOR CONGRESS | | | |
| ADDRESS (number and street) PO Box 3154 | | | |
| CITY West Chester | | STATE PA | ZIP CODE 19381-3154 |
| 2. NAME OF CANDIDATE Costello, Ryan A, , , | | 3. OFFICE SOUGHT (State and District) House PA 06 | |
| 4. FEC IDENTIFICATION NUMBER C00554899 | | | |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ | | | |
| A. FULL NAME Title Industry Political Action Committee | | | |
| MAILING ADDRESS 1800 M Street NW Suite 300S | | Name of Employer | |
| CITY Washington | STATE DC | ZIP CODE 20036-5830 | Date (month, day, year) 11/03/2016 |
| | | Amount 5000.00 | |
| | | Transaction ID : 63B672E6E005D4E21 | |
| Occupation | | | |
| B. FULL NAME Financial Services Political Committee | | | |
| MAILING ADDRESS Liberty CENTER-27th Floor | | Name of Employer | |
| CITY Pittsburgh | STATE PA | ZIP CODE 15222 | Date (month, day, year) 11/03/2016 |
| | | Amount 1000.00 | |
| | | Transaction ID : 6025B90AEEFE3454E | |
| Occupation | | | |
| C. FULL NAME ASSOCIATED GENERAL CONTRACTORS OF AMERICA POLITICAL ACTION COMMITTEE | | | |
| MAILING ADDRESS 2300 WILSON BLVD. SUITE 300 | | Name of Employer | |
| CITY ARLINGTON | STATE VA | ZIP CODE 22201 | Date (month, day, year) 11/03/2016 |
| | | Amount 1500.00 | |
| | | Transaction ID : 6BD183BE5EA494B1 | |
| Occupation | | | |
| D. FULL NAME American Hotel And Lodging Association PAC ('Hotelpac') | | | |
| MAILING ADDRESS 1250 I St NW Ste 1100 | | Name of Employer | |
| CITY Washington | STATE DC | ZIP CODE 20005-5904 | Date (month, day, year) 11/03/2016 |
| | | Amount 1000.00 | |
| | | Transaction ID : 600F23FE379EA48EF | |
| Occupation | | | |
| E. FULL NAME Firstenergy Corp. Political Action Committee | | | |
| MAILING ADDRESS 76 S Main Street | | Name of Employer | |
| CITY Akron | STATE OH | ZIP CODE 44308-1812 | Date (month, day, year) 11/04/2016 |
| | | Amount 2500.00 | |
| | | Transaction ID : 69973A57E7AAA4AB | |
| Occupation | | | |
| SIGNATURE (optional) DEXTER, LINDA, , , | | DATE 11/04/2016 | For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100 |
| [Electronically Filed] | | | |

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

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| ADDRESS (number and street) PO Box 3154 | | | |
| CITY, STATE, and ZIP CODE West Chester PA 19381-3154 | | | |
| 2. NAME OF CANDIDATE Costello, Ryan A, , , | 3. OFFICE SOUGHT (State and District) House PA 06 | 4. FEC IDENTIFICATION NUMBER C00554899 | |

5. IS THIS AN AMENDMENT? NO, THIS IS A NEW FILING YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____

| A. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer | Date (month, day, year) | Amount |
|--------------------------------------------------------------------------------------------------|-----------------------------------------------------|-------------------------|---------|
| AETNA INC. POLITICAL ACTION COMMITTEE 20 F STREET, NW SUITE 350 WASHINGTON DC 20001 | Transaction ID : 61C3386AE73CD468C961 Occupation | 11/04/2016 | 2500.00 |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer | Date (month, day, year) | Amount |
| | Occupation | | |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer | Date (month, day, year) | Amount |
| | Occupation | | |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer | Date (month, day, year) | Amount |
| | Occupation | | |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer | Date (month, day, year) | Amount |
| | Occupation | | |