

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

Collins for Congress

ADDRESS (number and street)

PO Box 386

Check if different than previously reported. (ACC)

Clarence

NY

14031-0386

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00520379

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NY

27

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 06 / 28 / 2016 in the State of NY

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on / / in the State of

5. Covering Period

04 / 01 / 2016

through

06 / 08 / 2016

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

Type or Print Name of Treasurer Jocelyn Jakubus

Signature of Treasurer Jocelyn Jakubus

[Electronically Filed]

Date

06 / 16 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Collins for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	102615.00	867215.08
(b) Total Contribution Refunds (from Line 20(d))	2000.00	2500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	100615.00	864715.08
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	38324.34	301278.78
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4634.20
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	38324.34	296644.58
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1133502.89	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	500000.00	

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 12/2003)

Write or Type Committee Name

Collins for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	55115.00	323435.08
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	55115.00	323435.08
(b) Political Party Committees.....	0.00	5025.00
(c) Other Political Committees (such as PACs).....	47500.00	538755.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	102615.00	867215.08
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.)	0.00	4634.20
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	2927.50	9181.50
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	105542.50	881030.78

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	38324.34	301278.78
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	2000.00	2500.00
(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)).....	2000.00	2500.00
21. OTHER DISBURSEMENTS	4195.00	50375.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	44519.34	354153.78

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1072479.73
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	105542.50
25. SUBTOTAL (add Line 23 and Line 24).....	1178022.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	44519.34
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1133502.89

**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 5 OF 82
	<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)
Collins for Congress

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

Mailing Address 236 Rivermist Drive

City Buffalo State NY Zip Code 14202-4310

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

Name of Employer Excelsior Orthopaedics Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **680.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : A2853279919F14ED48AB

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 9696 Mill Ridge Ln

City Great Falls State VA Zip Code 22066-2300

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

Name of Employer W Strategies Occupation Lobbyist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2016

Transaction ID : A25B62B0E79104E8290A

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
R. Mark Storch

Mailing Address 73 Dan Troy Drive

City Williamsville State NY Zip Code 14221-3551

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

Name of Employer Storch Cooperative Dev. Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **105.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 02 / 2016

Transaction ID : A1904FE25FFA943D1B8B

Amount of Each Receipt this Period
105.00

Memo Item

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

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

1605.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 82
	<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)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Philip Montante

Mailing Address 8198 Golden Oak Circle

City State Zip Code
Williamsville NY 14221-8502

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Buffalo Court Judge

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : A28BE752AF3E049E6AC1

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 194 Parrish Pond Court East

City State Zip Code
Southampton NY 11968

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NSHOA Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : A4FE10A8463DB4217BAF

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 8 Davids Way

City State Zip Code
Port Jefferson NY 11777-1154

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NSHOA Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : A22B564D405784A60A6F

Amount of Each Receipt this Period

Memo Item

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

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 7 OF 82
	<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)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Sig Molnar

Mailing Address 323 White Oak Lane

City State Zip Code
Grand Island NY 14072-3323

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

Name of Employer Occupation
N/A Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 17 / 2016

Transaction ID : AC871AEEA3D63460781F

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 6959 Lakeside Drive

City State Zip Code
Niagara Falls NY 14304-4687

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Transaction ID : AFB9A97CABB8B4ACC837

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 70 Wilmington Dr

City State Zip Code
Melville NY 11747-4028

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

Name of Employer Occupation
NSHOA Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : AA5CB5D99BE5D4EBD9AE

Amount of Each Receipt this Period
2500.00

Memo Item

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

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

3550.00

**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 8 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Andrew W. Dorn, Jr.

Mailing Address 5349 Columbia Avenue

City State Zip Code
Hamburg NY 14075-5743

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

Name of Employer Occupation
Hunerview Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 05 / 2016

Transaction ID : A43DD99B219924268885

Amount of Each Receipt this Period
1700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Dansa & D'Arata, LLP

Mailing Address 361 Delaware Ave

City State Zip Code
Buffalo NY 14202-1622

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 05 / 2016

Transaction ID : A8B3C4E9BA6F74E92A66

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 332 Park Place

City State Zip Code
Caledonia NY 14423-1131

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

Name of Employer Occupation
NA Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Transaction ID : AF9BFCCB7BC5A413FB50

Amount of Each Receipt this Period
120.00

Memo Item

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

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

2820.00

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

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

FOR LINE NUMBER: PAGE 9 OF 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
W. Austin Wadsworth

Mailing Address **4 SOUTH STREET**

City State Zip Code
Geneseo NY 14454-1310

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

Name of Employer Occupation
National Warplane Museum President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
65.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 06 / 2016

Transaction ID : A8B117BBF791C458A888

Amount of Each Receipt this Period
65.00

Memo Item

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

Mailing Address **5115 15th St. N**

City State Zip Code
Arlington VA 22205-2620

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

Name of Employer Occupation
Generic Pharmaceutical Assn. Government Relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 05 / 2016

Transaction ID : A15AD36405AA14DD9BCE

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address **6 Ellbridge Ct**

City State Zip Code
South Setauket NY 11720-4621

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

Name of Employer Occupation
NSHOA Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : A1921C75E84C54D508B0

Amount of Each Receipt this Period
2500.00

Memo Item

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

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

3065.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 82
	<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)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Brian D Rusk

Mailing Address 340 Wellingwood Drive

City East Amherst State NY Zip Code 14051-1753

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

Name of Employer WWKB Radio Occupation Public Affairs Host

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2105.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2016

Transaction ID : A5F94F37F465E4D1797C

Amount of Each Receipt this Period
 150.00

Memo Item

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

Mailing Address 6402 Woodberry Court

City East Amherst State NY Zip Code 14051-1547

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

Name of Employer NA Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **65.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2016

Transaction ID : A921C146A8515490893E

Amount of Each Receipt this Period
 65.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Brian D Rusk

Mailing Address 340 Wellingwood Drive

City East Amherst State NY Zip Code 14051-1753

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

Name of Employer WWKB Radio Occupation Public Affairs Host

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1855.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2016

Transaction ID : ACCBA8F8BB1954ABA80A

Amount of Each Receipt this Period
 100.00

Memo Item

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

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

315.00

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

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

FOR LINE NUMBER: PAGE 11 OF 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Roy Chen

Mailing Address 17 Green Street
Apt. 2A

City State Zip Code
Huntington NY 11743-3497

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

Name of Employer Occupation
NSHOA Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

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

Transaction ID : A2EA4569CDA214ACA8E7

Amount of Each Receipt this Period
 200.00

Memo Item

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

Mailing Address 1634 I St NW
Suite 1200

City State Zip Code
Washington DC 20006-4011

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

Name of Employer Occupation
RMVB Lobbyist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : ACC2F33C6BD464379B39

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Robert Rich , Jr.

Mailing Address 81100 Old Highway

City State Zip Code
Islamorada FL 33036-3715

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

Name of Employer Occupation
Rich Products CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016

Transaction ID : A0574F0CBCB0B43C5BE3

Amount of Each Receipt this Period
 2700.00

Memo Item

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

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

3900.00

**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 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
John S Militello

Mailing Address 15 Hoviland Lane

City State Zip Code
Getzville NY 14068-1402

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

Name of Employer Occupation
Kimil Co. Plumber

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2016

Transaction ID : A9464B77A8A9748819F9

Amount of Each Receipt this Period
 125.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Brian D Rusk

Mailing Address 340 Wellingwood Drive

City State Zip Code
East Amherst NY 14051-1753

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

Name of Employer Occupation
WWKB Radio Public Affairs Host

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2305.00

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

Transaction ID : AEADA3ABD9F794A2183F

Amount of Each Receipt this Period
 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Dan Gernatt , Jr.

Mailing Address 1434 Ellis Road

City State Zip Code
Angola NY 14006-9109

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

Name of Employer Occupation
Gernatt Asphalt Products CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : A3DD52FE8204E40288C3

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).....

1225.00

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

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

FOR LINE NUMBER: PAGE 13 OF 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Christine Pilozzi

Mailing Address 82 Clinton Street

City State Zip Code
Tonawanda NY 14150-2033

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

Name of Employer Occupation
Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2016

Transaction ID : AAEC05D2A45F1448E9C6

Amount of Each Receipt this Period
 _____ 55.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Zelda Nouri-Staiano

Mailing Address 25 The Preserve

City State Zip Code
Woodbury NY 11797-1809

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

Name of Employer Occupation
NSHOA Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : AAB566C3F6ACC4DE094E

Amount of Each Receipt this Period
 _____ 200.00

Memo Item

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

Mailing Address 9 Dorm Ct

City State Zip Code
East Setauket NY 11733-1081

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

Name of Employer Occupation
NSHOA Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : A4636D344F3094E6FA12

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

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

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

_____ 2755.00

**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 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Terry Lowell

Mailing Address 10065 Fair Street

City Dalton State NY Zip Code 14836-9655

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2016

Transaction ID : A1E3C96BA86C24BFF9ED

Amount of Each Receipt this Period
 50.00

Memo Item

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

Mailing Address 9 Badger Trail

City Coram State NY Zip Code 11727-2137

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

Name of Employer Occupation
 NSHOA Chief Clinical Officer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : AA208AE63B27F41478DD

Amount of Each Receipt this Period
 200.00

Memo Item

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

Mailing Address 19 Christen Court

City Lancaster State NY Zip Code 14086-3101

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

Name of Employer Occupation
 Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2016

Transaction ID : A2A1AFBF75132460DBC6

Amount of Each Receipt this Period
 25.00

Memo Item

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

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

275.00

**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 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Collins for Congress

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

Mailing Address 175 Gnarled Hollow Road

City East Setauket State NY Zip Code 11733-1933

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

Name of Employer NSHOA Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : A74F023E25E3B4E3597D

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address 3615 Lake Avenue

City Blasdell State NY Zip Code 14219-1509

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

Name of Employer NA Occupation Disabled

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
440.08

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : AFFEF11C18CEE4DD399C

Amount of Each Receipt this Period
15.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Brian D Rusk

Mailing Address 340 Wellingwood Drive

City East Amherst State NY Zip Code 14051-1753

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

Name of Employer WWKB Radio Occupation Public Affairs Host

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : A4DA36D598C74405DB58

Amount of Each Receipt this Period
100.00

Memo Item

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

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

2615.00

**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 16 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Collins for Congress

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

Mailing Address 1813 Quaker Meeting House Road

City Honeoye Falls State NY Zip Code 14472-9111

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

Name of Employer National War Occupation Director of Planning

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **65.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 06 / 2016

Transaction ID : A66056A49BAFA4D5A981

Amount of Each Receipt this Period
65.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Dan Gernatt , Jr.

Mailing Address 1434 Ellis Road

City Angola State NY Zip Code 14006-9109

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

Name of Employer Gernatt Asphalt Products Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 17 / 2016

Transaction ID : A0D709D161F2749878CA

Amount of Each Receipt this Period
1700.00

Memo Item

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

Mailing Address 695 Short Beach Road

City Saint James State NY Zip Code 11780-4111

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

Name of Employer NSHOA Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

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

Transaction ID : A088D64D63B8B48F4964

Amount of Each Receipt this Period
2500.00

Memo Item

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

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

4265.00

**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 17 OF 82
	<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)
Collins for Congress

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

Mailing Address 84 Pineview Lane

City Coram State NY Zip Code 11727-5110

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

Name of Employer NSHOA Occupation Chief Revenue Officer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

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

Transaction ID : AF72C15CE4E9C44F689C

Amount of Each Receipt this Period
 200.00

Memo Item

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

Mailing Address 1333 E Main St #2

City Riverhead State NY Zip Code 11901-1524

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

Name of Employer NSHOA Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

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

Transaction ID : A8B7A6040221247F6BFD

Amount of Each Receipt this Period
 2500.00

Memo Item

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

Mailing Address 6 Timber Ridge Drive

City Huntington State NY Zip Code 11743-4898

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

Name of Employer NSHOA Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

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

Transaction ID : A9155DDA9F11F4A9FB37

Amount of Each Receipt this Period
 200.00

Memo Item

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

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

2900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 82
	<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)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Dale Stein

Mailing Address 8246 North Road

City Le Roy State NY Zip Code 14482-9114

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

Name of Employer Self Occupation Farmer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
130.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2016

Transaction ID : A1ACE516496AA4E0EB1D

Amount of Each Receipt this Period
65.00

Memo Item

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

Mailing Address 84 Pineview Lane

City Coram State NY Zip Code 11727-5110

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

Name of Employer NSHOA Occupation Chief Revenue Officer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

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

Transaction ID : AD8873967C7444427AA1

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 99 Locust Drive

City Middletown State PA Zip Code 17057-3836

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

Name of Employer The Patriot News Occupation Service

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 10 / 2016

Transaction ID : AF9ADCB66D4AE407181C

Amount of Each Receipt this Period
25.00

Memo Item

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

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

290.00

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

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

FOR LINE NUMBER: PAGE 19 OF 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Richard Young

Mailing Address 44 Lakeside Crescent

City Lancaster State NY Zip Code 14086-2645

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

Name of Employer Performance Advantage Co. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2016

Transaction ID : A48592D6FBC8E4A01A4D

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 35 Colony Lane

City Syosset State NY Zip Code 11791-4723

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

Name of Employer NSHOA Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

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

Transaction ID : ADEDA39BE49BF45D39B5

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 22 Wedgwood Circle

City East Setauket State NY Zip Code 11733

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

Name of Employer NSHOA Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : A32EE329DD02E424C887

Amount of Each Receipt this Period
2500.00

Memo Item

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

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

5400.00

**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 20 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Clayton Ertel

Mailing Address 5675 Chatham Lane

City State Zip Code
Clarence Center NY 14032-9542

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

Name of Employer Occupation
Realty USA Real Estate Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
55.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : AF638D18F0B4E4DAFB98

Amount of Each Receipt this Period
55.00

Memo Item

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

Mailing Address 19 Shore Oaks Dr

City State Zip Code
Stony Brook NY 11790-1422

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

Name of Employer Occupation
NSHOA Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : AE90F91E9F92744B0B7C

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Ralph V Showalter

Mailing Address 9625 The Maples

City State Zip Code
Clarence NY 14031-1591

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

Name of Employer Occupation
Buffalo Tungsten Corp President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : AEA57A646916244C48AA

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

5255.00

**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 21 OF 82
	<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)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Elizabeth Reszka

Mailing Address 3615 Lake Avenue

City State Zip Code
Blasdell NY 14219-1509

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

Name of Employer Occupation
NA Disabled

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
425.08

Date of Receipt
M M / D D / Y Y Y Y
04 / 20 / 2016

Transaction ID : A5BAF6DA214E14932900

Amount of Each Receipt this Period
15.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Thomas M Montante

Mailing Address 4324 Lower River Rd

City State Zip Code
Youngstown NY 14174-9754

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

Name of Employer Occupation
TM Montante Development President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7400.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2016

Transaction ID : ABEDE7459C2CC4305918

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 9 Badger Trail

City State Zip Code
Coram NY 11727-2137

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

Name of Employer Occupation
NSHOA COO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

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

Transaction ID : A2AAC8A2717764A46BF9

Amount of Each Receipt this Period
200.00

Memo Item

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

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

2915.00

**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 22 OF 82
	<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)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Mary Strickland

Mailing Address 4632 Lakeville-Groveland Road

City Geneseo	State NY	Zip Code 14454-9737
-----------------	-------------	------------------------

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
70.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2016

Transaction ID : A732AAA74B31744A6922

Amount of Each Receipt this Period
70.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Brian D Rusk

Mailing Address 340 Wellingwood Drive

City East Amherst	State NY	Zip Code 14051-1753
----------------------	-------------	------------------------

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

Name of Employer WWKB Radio	Occupation Public Affairs Host
--------------------------------	-----------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2105.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2016

Transaction ID : A374602ACAB45436380B

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 23 Valentine Rd

City Shoreham	State NY	Zip Code 11786-1243
------------------	-------------	------------------------

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

Name of Employer NSHOA	Occupation Physician
---------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : AF64F1E92EB71460E8BE

Amount of Each Receipt this Period
2500.00

Memo Item

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

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

2670.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 82
	<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)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Todd Brason

Mailing Address 58 Tudor Place

City State Zip Code
Buffalo NY 14222-1616

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

Name of Employer Occupation
Willcare Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2016

Transaction ID : A865C82DB254446E9B51

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 19 Christen Court

City State Zip Code
Lancaster NY 14086-3101

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

Name of Employer Occupation
Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 17 / 2016

Transaction ID : A1B47A75E59EF4F9C94D

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 4221 36th St South

City State Zip Code
Arlington VA 22206-1807

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

Name of Employer Occupation
Prime Policy Group Lobbyist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : A6643592709B24E1590C

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).....

2975.00

**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 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Gurmohan Syali

Mailing Address 129 Breeley Blvd

City Melville State NY Zip Code 11747-5332

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

Name of Employer NSHOA Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : A7401B80733144297A11

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address 3615 Lake Avenue

City Blasdell State NY Zip Code 14219-1509

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

Name of Employer NA Occupation Disabled

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
455.08

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : A3C6D92C8C6DE4D19A8E

Amount of Each Receipt this Period
15.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Raymond Herman , III

Mailing Address 114 Oakgrove Drive

City Williamsville State NY Zip Code 14221-6910

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

Name of Employer Erie County Occupation Lawyer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
55.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 27 / 2016

Transaction ID : A2EB0285DC5A244ADAC3

Amount of Each Receipt this Period
55.00

Memo Item

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

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

2570.00

55115.00

**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 82
	<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)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Apria Healthcare Inc Pac (Fka)homedco Inc Pac

Mailing Address 26220 Enterprise Ct

City Lake Forest State CA Zip Code 92630-8405

FEC ID number of contributing federal political committee. **C C00240218**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

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

Transaction ID : A3F05AA24E31B4917A84

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address 2980 Fairview Park Dr

City Falls Church State VA Zip Code 22042-4511

FEC ID number of contributing federal political committee. **C C00088591**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : A8CADA3BDC73647C8ACA

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 10 Lafayette Sq

City Buffalo State NY Zip Code 14203-1824

FEC ID number of contributing federal political committee. **C C00083758**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
9400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : AAD776E8BEB434A78A34

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).....

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 82
	<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)
Collins for Congress

A. ENG PAC

Full Name (Last, First, Middle Initial)
ENG PAC

Mailing Address 2980 Fairview Park Dr

City Falls Church State VA Zip Code 22042-4511

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2016

Transaction ID : ABED473E7E0034310A5E

Amount of Each Receipt this Period
2000.00

Memo Item

B. Republican Main Street PAC

Full Name (Last, First, Middle Initial)
Republican Main Street PAC

Mailing Address 1220 L St NW
Ste 100-263

City Washington State DC Zip Code 20005-4018

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
9000.00

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

Transaction ID : A49AF9F19527B454BB98

Amount of Each Receipt this Period
1000.00

Memo Item

C. Time Warner Cable Federal PAC

Full Name (Last, First, Middle Initial)
Time Warner Cable Federal PAC

Mailing Address 901 F St NW

City Washington State DC Zip Code 20004-1417

FEC ID number of contributing federal political committee. **C** C00431551

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2016

Transaction ID : A838BDBB561A9430696D

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).....

5000.00

**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 27 OF 82
	<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)
Collins for Congress

A. Cobham Holdings Inc Political Action Committee 'Cobham Pac'

Full Name (Last, First, Middle Initial)
Mailing Address 2121 Crystal Dr

City State Zip Code
Arlington VA 22202-3706

FEC ID number of contributing federal political committee. **C C00457051**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2016

Transaction ID : A11750EEA10FD431BADF

Amount of Each Receipt this Period
500.00

Memo Item

B. Petroleum Marketers Association Of American\small Business Committee

Full Name (Last, First, Middle Initial)
Mailing Address 1901 Fort Myer Dr Ste 500

City State Zip Code
Arlington VA 22209-1609

FEC ID number of contributing federal political committee. **C C00035204**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : A17B659CC8E804524BCE

Amount of Each Receipt this Period
1500.00

Memo Item

C. Nextera Energy, Inc. Pac

Full Name (Last, First, Middle Initial)
Mailing Address 801 Pennsylvania Ave NW Ste 220

City State Zip Code
Washington DC 20004-2679

FEC ID number of contributing federal political committee. **C C00064774**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 03 / 2016

Transaction ID : A3C440B835C31477991B

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).....

3000.00

**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 28 OF 82
	<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)
Collins for Congress

A. LabPAC
Full Name (Last, First, Middle Initial)
Mailing Address 1100 New York Ave NW
City Washington State DC Zip Code 20005-6172
FEC ID number of contributing federal political committee. **C C00410084**
Name of Employer Occupation
Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2016
Transaction ID : A88817774175C427795D
Amount of Each Receipt this Period
1000.00
 Memo Item

B. Dominion Resources, Inc. Political Action Committee - Dominion Pac
Full Name (Last, First, Middle Initial)
Mailing Address One James River Plaza 20th Floor O
City Richmond State VA Zip Code 23261
FEC ID number of contributing federal political committee. **C C00108209**
Name of Employer Occupation
Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 10 / 2016
Transaction ID : A8D16282F529347CF8EA
Amount of Each Receipt this Period
1000.00
 Memo Item

C. First Niagara Bank Na Pac
Full Name (Last, First, Middle Initial)
Mailing Address 726 Exchange St Larkin Building
City Buffalo State NY Zip Code 14210-1463
FEC ID number of contributing federal political committee. **C C00570309**
Name of Employer Occupation
Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 06 / 2016
Transaction ID : A92090A1C37E046B0BA5
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).....

3000.00

**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 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Collins for Congress

A. National Air Traffic Controllers Association Pac
 Full Name (Last, First, Middle Initial)
 Mailing Address 1325 Massachusetts Avenue NW
 City Washington State DC Zip Code 20005-4171
 FEC ID number of contributing federal political committee. **C C00238725**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016
Transaction ID : A0835154FE80244C7BEE
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Genzyme Corporation Pac (Genz-pac)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1850 K St NW Ste 650
 City Washington State DC Zip Code 20006-2205
 FEC ID number of contributing federal political committee. **C C00393736**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2016
Transaction ID : ACC58ED6883CE49E2982
 Amount of Each Receipt this Period
 2500.00
 Memo Item

C. Amgen Inc. Pac
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 13th St NW Fl 12
 City Washington State DC Zip Code 20005-3819
 FEC ID number of contributing federal political committee. **C C00251876**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2016
Transaction ID : AEEFA70E6613D4F958D9
 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 30 OF 82
	<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)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Avangrid Pac

Mailing Address 52 Farm View Dr

City State Zip Code
New Gloucester ME 04260-5100

FEC ID number of contributing federal political committee. **C** C00406801

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : A7C51F281862544289BA

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address PO Box 2958

City State Zip Code
Danbury CT 06813-2958

FEC ID number of contributing federal political committee. **C** C00283440

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2016

Transaction ID : A902633A153C1466CAA3

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
National Air Traffic Controllers Association Pac

Mailing Address 1325 Massachusetts Avenue NW

City State Zip Code
Washington DC 20005-4171

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : A8E72754B31884877AC1

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 31 OF 82
	<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)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
American Federation Of Govt. Empl. PAC

Mailing Address 80 F St NW

City Washington State DC Zip Code 20001-1528

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : ACEC1F18761374DEA806

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
National Air Traffic Controllers Association Pac

Mailing Address 1325 Massachusetts Avenue NW

City Washington State DC Zip Code 20005-4171

FEC ID number of contributing federal political committee. **C C00238725**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : A527822FC34A040CEB72

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Regeneron Pharmaceuticals Inc Pac (Regeneron Pac)

Mailing Address 777 Old Saw Mill River Rd

City Tarrytown State NY Zip Code 10591-6717

FEC ID number of contributing federal political committee. **C C00562264**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2016

Transaction ID : A04407CBAF88D4FB09F1

Amount of Each Receipt this Period
2500.00

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 32 OF 82
	<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)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Centrus Energy Corp. PAC

Mailing Address 6901 Rockledge Dr
Ste 800

City State Zip Code
Bethesda MD 20817-1867

FEC ID number of contributing federal political committee. **C C00355719**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2016

Transaction ID : ADB1D011FC5874E1BB2C

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
American Society For Radiation Oncology PAC Aka Astro PAC

Mailing Address 251 18th St S
Fl 8

City State Zip Code
Arlington VA 22202-3531

FEC ID number of contributing federal political committee. **C C00384602**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2016

Transaction ID : AF5EDC106896741B0A7F

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Apria Healthcare Inc Pac (Fka)homedco Inc Pac

Mailing Address 26220 Enterprise Ct

City State Zip Code
Lake Forest CA 92630-8405

FEC ID number of contributing federal political committee. **C C00240218**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : A52A2489330DA404BABB

Amount of Each Receipt this Period
1500.00

Memo Item

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

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

3500.00

**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 33 OF 82
	<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)
Collins for Congress

A. Trust Pac Team Republicans For Utilizing Sensible Tactics

Full Name (Last, First, Middle Initial)
Trust Pac Team Republicans For Utilizing Sensible Tactics

Mailing Address 228 S Washington St
Ste 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00330720

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

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

Transaction ID : A7C0312B2657440889F7

Amount of Each Receipt this Period
5000.00

Memo Item

B. Genesee & Wyoming Inc. PAC

Full Name (Last, First, Middle Initial)
Genesee & Wyoming Inc. PAC

Mailing Address 3601 Concord Rd

City York State PA Zip Code 17402-8741

FEC ID number of contributing federal political committee. **C** C00289058

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2016

Transaction ID : AF348DA3CF80D4423914

Amount of Each Receipt this Period
1000.00

Memo Item

C. CSX Corporation Good Gov't Fund

Full Name (Last, First, Middle Initial)
CSX Corporation Good Gov't Fund

Mailing Address 1331 Pennsylvania Ave, NW
Suite 560, National Place

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : A8B995EC86FEF4F8DB12

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).....

7000.00

**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 34 OF 82
	<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)
Collins for Congress

A. National Grid Usa Political Action Committee

Full Name (Last, First, Middle Initial)
National Grid Usa Political Action Committee

Mailing Address 325 7th St NW

City Washington State DC Zip Code 20004-2830

FEC ID number of contributing federal political committee. **C C00048702**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2016

Transaction ID : A60109E3F848048769A4

Amount of Each Receipt this Period
2000.00

Memo Item

B. Nuclear Energy Institute Federal PAC

Full Name (Last, First, Middle Initial)
Nuclear Energy Institute Federal PAC

Mailing Address 1776 I St NW

City Washington State DC Zip Code 20006-3759

FEC ID number of contributing federal political committee. **C C00239848**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : A98C1B006BAB44CD89A2

Amount of Each Receipt this Period
1000.00

Memo Item

C. Citigroup Inc. PAC

Full Name (Last, First, Middle Initial)
Citigroup Inc. PAC

Mailing Address 1101 Pennsylvania Avenue NW
Suite 1000

City Washington State DC Zip Code 20004-2524

FEC ID number of contributing federal political committee. **C C00008474**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2016

Transaction ID : A5E9FF757CDD3468A862

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).....

4000.00

**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 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Arent Fox Llp Pac (Afpac)

Mailing Address 1717 K St NW
Arent Fox Llp

City Washington State DC Zip Code 20006-5343

FEC ID number of contributing federal political committee. **C C00241380**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2016

Transaction ID : AA46C5FBD916A4D79AB2

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Exelon Corporation Political Action Committee (exelon Pac)

Mailing Address 101 Constitution Avenue NW
Suite 400 E

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00141218**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2016

Transaction ID : AD9E0B4C952884BF29FC

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Powerpac Of The Edison Electric Institute

Mailing Address 701 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2608

FEC ID number of contributing federal political committee. **C C00095869**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : A83DA14F053034BBF99D

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

47500.00

**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 36 OF 82
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Collins for Congress

A. Full Name (Last, First, Middle Initial)
Right To Rise Supre PAC, Inc.

Mailing Address 601 Pennsylvania Ave NW
North Building, Suite 1000

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00571372

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2927.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : A7C3FB19A588A415CA27

Amount of Each Receipt this Period
2927.50

Memo Item
Refund of contribution made

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

2927.50

2927.50

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 11.25
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement Credit card processing fee		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : BE34BCD26C4104071842
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Citibank		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 388 Greenwich Street		Amount of Each Disbursement this Period 45.00
City New York	State NY Zip Code 10013-2375	
Purpose of Disbursement Travel fee		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : B99CBC693983E4F06BB1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) c. Erynn Hook		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 200 S Van Dorn Street Apt. A208		Amount of Each Disbursement this Period 94.49
City Alexandria	State VA Zip Code 22304-4326	
Purpose of Disbursement Mileage		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : B08B8F07D277C49E885C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 002	

SUBTOTAL of Disbursements This Page (optional).....	150.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Citibank		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2016
Mailing Address 388 Greenwich Street		Amount of Each Disbursement this Period 356.20
City New York	State NY	
Zip Code 10013-2375	Purpose of Disbursement Airfare	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 002	Transaction ID : BE8FF2E04ECD34F74B1A
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2016
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 2.93
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement Credit card processing fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : B0EE9DCA1A9304AFAA93
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2016
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 2.93
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement Credit card processing fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : B379A526B854B42AF82A
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	362.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement MM / DD / YYYY 04 / 10 / 2016
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 1.13
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement Credit card processing fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B15BBF8E2A0E94D3DAD1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jocelyn Jakubus		Date of Disbursement MM / DD / YYYY 04 / 10 / 2016
Mailing Address 68 Brockett Drive		Amount of Each Disbursement this Period 1000.00
City Tonawanda	State NY	
Zip Code 14223-1421	Purpose of Disbursement Finance consultant	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B5F2BC44E039547A6B37
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Michael Kracker		Date of Disbursement MM / DD / YYYY 04 / 11 / 2016
Mailing Address 429 Mill Street		Amount of Each Disbursement this Period 61.18
City Williamsville	State NY	
Zip Code 14221-5150	Purpose of Disbursement Lunch reimbursement	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : B3984BF273BC04624BA7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1062.31
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Payroll By Paychex		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2016
Mailing Address 33 Dodge Road #110		Amount of Each Disbursement this Period 126.07
City Getzville	State NY Zip Code 14068-1540	
Purpose of Disbursement Pa	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : BBB53668099944CE38DC
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Payroll By Paychex		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2016
Mailing Address 33 Dodge Road #110		Amount of Each Disbursement this Period 211.98
City Getzville	State NY Zip Code 14068-1540	
Purpose of Disbursement Payroll salary	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : BA46C75FDBBB047A097F
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Michael Hook		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2016
Mailing Address 1541 Buccaneer Court		Amount of Each Disbursement this Period 2000.00
City Marco Island	State FL Zip Code 34145-4136	
Purpose of Disbursement C	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B0181593D631B4C2CAE5
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2338.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 82			
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 22.50
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement Credit card processing fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B534251ADB0C2479B882
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx, Inc.		Date of Disbursement MM / DD / YYYY 04 / 27 / 2016
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 45.00
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement Credit card processing fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B732472776D30413885C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Payroll By Paychex		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 33 Dodge Road #110		Amount of Each Disbursement this Period 112.18
City Getzville	State NY	
Zip Code 14068-1540	Purpose of Disbursement Payroll	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : BE4CA0204AEC44DE88AD
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	179.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 82	
	<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)
Collins for Congress

A. Payroll By Paychex

Full Name (Last, First, Middle Initial)
Mailing Address 33 Dodge Road #110

City Getzville State NY Zip Code 14068-1540

Purpose of Disbursement Payroll salary

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 28 / 2016

Amount of Each Disbursement this Period: 211.96

Memo Item

Transaction ID : BBA45A63EF73C47D3AC4

B. Piryx, Inc.

Full Name (Last, First, Middle Initial)
Mailing Address 144 2nd Street Floor 1

City San Francisco State CA Zip Code 94105-3718

Purpose of Disbursement Credit card processing fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 02 / 2016

Amount of Each Disbursement this Period: 4.73

Memo Item

Transaction ID : B8BF500943EA44B28B50

C. Piryx, Inc.

Full Name (Last, First, Middle Initial)
Mailing Address 144 2nd Street Floor 1

City San Francisco State CA Zip Code 94105-3718

Purpose of Disbursement Credit card processing fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 05 / 2016

Amount of Each Disbursement this Period: 22.50

Memo Item

Transaction ID : BA94116448C204C27864

SUBTOTAL of Disbursements This Page (optional) 239.19

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2016
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 121.50 <input type="checkbox"/> Memo Item
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement Credit card processing fee	Category/Type 001	Transaction ID : B083CA5707EE24F7CBE1
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Payroll By Paychex		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2016
Mailing Address 33 Dodge Road #110		Amount of Each Disbursement this Period 118.24 <input type="checkbox"/> Memo Item
City Getzville	State NY Zip Code 14068-1540	
Purpose of Disbursement Payroll ta	Category/Type 001	Transaction ID : B263AB8F2E9DC40ED91A
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Payroll By Paychex		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2016
Mailing Address 33 Dodge Road #110		Amount of Each Disbursement this Period 211.96 <input type="checkbox"/> Memo Item
City Getzville	State NY Zip Code 14068-1540	
Purpose of Disbursement Payroll salary	Category/Type 001	Transaction ID : BBB55D4C6C85E4A91B63
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	451.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Alex Gould		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2016
Mailing Address 847 W River Road		Amount of Each Disbursement this Period 12.49
City Grand Island	State NY	
Zip Code 14072-2424	Purpose of Disbursement apply reimbursement	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : B7772484A7D39485AA3F
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. L Lucas Lamb		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2016
Mailing Address 223 Zubrick Road		Amount of Each Disbursement this Period 150.00
City Depew	State NY	
Zip Code 14043-4312	Purpose of Disbursement Photos	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 007	Transaction ID : B2C27A76CA3E447C89DD
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jocelyn Jakubus		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2016
Mailing Address 68 Brockett Drive		Amount of Each Disbursement this Period 1000.00
City Tonawanda	State NY	
Zip Code 14223-1421	Purpose of Disbursement Finance consultant	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : BE60B6B114F5D4014BEC
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1162.49
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Michael Hook		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2016
Mailing Address 1541 Buccaneer Court		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Memo Item
City Marco Island	State FL Zip Code 34145-4136	
Purpose of Disbursement Campaign consultant	Category/Type 001	Transaction ID : B47F76464A8714969AA2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2016
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 2.48 <input type="checkbox"/> Memo Item
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement Credit card processing fee	Category/Type 001	Transaction ID : BB9ABCF9EA1E64A5697B
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Payroll By Paychex		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2016
Mailing Address 33 Dodge Road #110		Amount of Each Disbursement this Period 118.44 <input type="checkbox"/> Memo Item
City Getzville	State NY Zip Code 14068-1540	
Purpose of Disbursement Payroll	Category/Type 001	Transaction ID : B74DF9DB91CCF4C93A6B
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2120.92
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2016
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 2.48
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement Credit card processing fee	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : BE31A2AC95AF54CC2B4E
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Payroll By Paychex		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2016
Mailing Address 33 Dodge Road #110		Amount of Each Disbursement this Period 211.97
City Getzville	State NY Zip Code 14068-1540	
Purpose of Disbursement Payroll salary	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B5B3CF0DDDD5345A6A08
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 2.93
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement Credit card processing fee	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B5CC6007C80944821B4F
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	217.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 2.93
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement Credit card processing fee		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : BD707CD4694BE4BC197B
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Axiom Strategies		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2016
Mailing Address 1251 NW Briarcliff Parkway Suite 85		Amount of Each Disbursement this Period 1996.00
City Kansas City	State MO Zip Code 64116-1780	
Purpose of Disbursement Campaign printing		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : B4F3DD7BB278A42B388B
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 006	

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 1428.71
City Newark	State NJ Zip Code 07101-1270	
Purpose of Disbursement Credit card payment		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : BB044B7BFEFA542638F2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	3427.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Aristotle		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 500.00
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Monthly software 001 Category/Type	
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input checked="" type="checkbox"/> Memo Item Transaction ID : BF15A415BA3764725A7D
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 19.00
City Atlanta State GA Zip Code 30320-6001	Purpose of Disbursement Airline fee 002 Category/Type	
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input checked="" type="checkbox"/> Memo Item Transaction ID : BCFC0090ED6664E1F9AD
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) c. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address 229 W Genesee Street		Amount of Each Disbursement this Period 29.40
City Buffalo State NY Zip Code 14202-2604	Purpose of Disbursement Postage 001 Category/Type	
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input checked="" type="checkbox"/> Memo Item Transaction ID : BDC5AC5B0C7FD4D41B01
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address PO Box 06649		Amount of Each Disbursement this Period 72.00
City Chicago	State IL Zip Code 60606-0649	
Purpose of Disbursement Travel fee	Category/Type 002	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B4B785F3D6E9D492DADC
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Emma, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address 2120 8th Avenue S		Amount of Each Disbursement this Period 25.60
City Nashville	State TN Zip Code 37204-2204	
Purpose of Disbursement Monthly email	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : BBE615A15FEB34E69857
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 29.00
City Atlanta	State GA Zip Code 30320-6001	
Purpose of Disbursement Airline fee	Category/Type 002	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B1CFCBA401E684AF8B49
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Southwest Air		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016
Mailing Address PO Box 36611		Amount of Each Disbursement this Period 352.98
City Dallas	State TX	
Zip Code 75235-1611	Purpose of Disbursement Airfare	<input checked="" type="checkbox"/> Memo Item
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B145FC39CB18B41FEBB0
State: District:		

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016
Mailing Address PO Box 06649		Amount of Each Disbursement this Period 203.10
City Chicago	State IL	
Zip Code 60606-0649	Purpose of Disbursement Travel fee	<input checked="" type="checkbox"/> Memo Item
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : BB1E92E8DFA3C4D7C8D4
State: District:		

Full Name (Last, First, Middle Initial) c. Santora's		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2016
Mailing Address 7800 Transit Rd		Amount of Each Disbursement this Period 132.89
City Buffalo	State NY	
Zip Code 14221-4118	Purpose of Disbursement Fundraising lunch	<input checked="" type="checkbox"/> Memo Item
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B1FC00B05EBD342F0B5B
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Walmart		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2016
Mailing Address 5033 Transit Road		Amount of Each Disbursement this Period 64.74
City Williamsville	State NY	
Zip Code 14221-4132	Purpose of Disbursement Supplies	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : BEA11FDE5CA7E448D850
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 6035.38
City Newark	State NJ	
Zip Code 07101-1270	Purpose of Disbursement Credit card payment	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B8D8626B5B5644AB2AF5
State: District:		

Full Name (Last, First, Middle Initial) c. Charleston Black Cab Co		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2016
Mailing Address 1529 Sam Rittenberg Blvd. #2B		Amount of Each Disbursement this Period 54.25
City Charleston	State SC	
Zip Code 29407-4194	Purpose of Disbursement Travel	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B39CB9F97BEAB4BE583E
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6035.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Charleston Black Cab Co		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016
Mailing Address 1529 Sam Rittenberg Blvd. #2B		Amount of Each Disbursement this Period 54.25
City Charleston	State SC Zip Code 29407-4194	
Purpose of Disbursement Travel	Category/Type 002	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B6FD8C12B19FA4C44B0C
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Charleston Black Cab Co		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016
Mailing Address 1529 Sam Rittenberg Blvd. #2B		Amount of Each Disbursement this Period 10.00
City Charleston	State SC Zip Code 29407-4194	
Purpose of Disbursement Travel	Category/Type 002	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B834192B71EAF480BB03
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 607.62
City Washington	State DC Zip Code 20003-1801	
Purpose of Disbursement Fundraising dinner	Category/Type 003	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B28F23D192E6C4485BCA
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 82			
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Aristotle			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016		
Mailing Address 205 Pennsylvania Avenue SE			Amount of Each Disbursement this Period 500.00		
City Washington	State DC	Zip Code 20003-1164	<input checked="" type="checkbox"/> Memo Item Transaction ID : BE97E963A400C4E34A58		
Purpose of Disbursement Monthly software		Category/ Type 001			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Wyndham The Mill House			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2016		
Mailing Address 115 Meeting Street			Amount of Each Disbursement this Period 443.80		
City Charleston	State SC	Zip Code 29401-2214	<input checked="" type="checkbox"/> Memo Item Transaction ID : BCF98EB0E85CA45D49A1		
Purpose of Disbursement Hotel		Category/ Type 002			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. High Cotton of Charleston			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2016		
Mailing Address 199 E Bay St			Amount of Each Disbursement this Period 25.28		
City Charleston	State SC	Zip Code 29401-2605	<input checked="" type="checkbox"/> Memo Item Transaction ID : BF60D1CFC9898403BB0B		
Purpose of Disbursement Fundraising		Category/ Type 003			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. First Niagara Center		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2016
Mailing Address 1 Seymour Knox III Plaza		Amount of Each Disbursement this Period 13.50
City Buffalo State NY Zip Code 14203-3007	Purpose of Disbursement Parking fee	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : B3EA3703543DA4565B91
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2016
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 19.00
City Atlanta State GA Zip Code 30320-6001	Purpose of Disbursement Airfare fee	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : BA20A3794A9DA443AAC3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. FedEx		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2016
Mailing Address 525 Seventh Avenue		Amount of Each Disbursement this Period 70.50
City New York State NY Zip Code 10018	Purpose of Disbursement Shipping	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : BABBE8F3FC1D34B94B78
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2016
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 19.00
City Atlanta State GA Zip Code 30320-6001	Purpose of Disbursement Airfare fee 002 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : BF800C0AAD6024F129BD
State: District:		

Full Name (Last, First, Middle Initial) B. Michael's		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2016
Mailing Address 5055 Transit Rd,		Amount of Each Disbursement this Period 115.21
City Buffalo State NY Zip Code 14221-4132	Purpose of Disbursement Supplies 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B44B89141E39A4C03AA0
State: District:		

Full Name (Last, First, Middle Initial) c. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2016
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 385.20
City Atlanta State GA Zip Code 30320-6001	Purpose of Disbursement Airfare 002 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : BB81854C47C374668A7A
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 82			
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Giancarlo's			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2016		
Mailing Address 5110 Main St			Amount of Each Disbursement this Period 80.06		
City Williamsville	State NY	Zip Code 14221-5256	<input type="checkbox"/> Memo Item Transaction ID : B6273D2DC76BF44C9BF2		
Purpose of Disbursement Fundraising diner		Category/ Type 003			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Jenss			Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2016		
Mailing Address 4001 Maple Road			Amount of Each Disbursement this Period 141.38		
City Amherst	State NY	Zip Code 14226-1029	<input checked="" type="checkbox"/> Memo Item Transaction ID : B83775144149F4F97804		
Purpose of Disbursement Gift		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Sweet Jenny's			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2016		
Mailing Address 5732 Main St			Amount of Each Disbursement this Period 35.34		
City Williamsville	State NY	Zip Code 14221-5520	<input checked="" type="checkbox"/> Memo Item Transaction ID : B9203E03AAF4A423F99E		
Purpose of Disbursement Lunch		Category/ Type 003			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Oh Pour L'amour Du Chocolat			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2016	
Mailing Address 4476 Main St			Amount of Each Disbursement this Period 176.72	
City Buffalo	State NY	Zip Code 14226-4463	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement Gift		Category/ Type	Transaction ID : B1AA32367E24040B891C	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. FedEx			Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2016	
Mailing Address 525 Seventh Avenue			Amount of Each Disbursement this Period 73.50	
City New York	State NY	Zip Code 10018	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement Shipping		Category/ Type 001	Transaction ID : BD921C8B3309E499088E	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. FedEx			Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2016	
Mailing Address 525 Seventh Avenue			Amount of Each Disbursement this Period 4.34	
City New York	State NY	Zip Code 10018	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement Shipping		Category/ Type 001	Transaction ID : B3EE6856D8AD145C38F5	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Taxi Affiliated Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2016
Mailing Address 4536 N Elston Ave		Amount of Each Disbursement this Period 59.75
City Chicago State IL Zip Code 60630-4421	Purpose of Disbursement Taxi Category/Type 002	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B40D10C9C202940EDB1B
State: District:		

Full Name (Last, First, Middle Initial) B. Irishman		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2016
Mailing Address 5601 Main Street		Amount of Each Disbursement this Period 53.66
City Williamsville State NY Zip Code 14221-5411	Purpose of Disbursement Fundraising lunch Category/Type 003	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B936319B53DAC42818C0
State: District:		

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2016
Mailing Address 4333 Amon Carter Blvd.		Amount of Each Disbursement this Period 147.10
City Ft Worth State TX Zip Code 76155-2605	Purpose of Disbursement Airfare Category/Type 002	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B1107F59A560F416C94C
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2016
Mailing Address 4333 Amon Carter Blvd.		Amount of Each Disbursement this Period 108.10
City Ft Worth State TX Zip Code 76155-2605	Purpose of Disbursement Airfare	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : B2CA07FDC471C4D6EA47
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2016
Mailing Address PO Box 06649		Amount of Each Disbursement this Period 60.00
City Chicago State IL Zip Code 60606-0649	Purpose of Disbursement Travel fee	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : B80759908ED784C9798C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. McDonalds		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016
Mailing Address 12976 Main Road		Amount of Each Disbursement this Period 7.14
City Akron State NY Zip Code 14001-9777	Purpose of Disbursement Lunch	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B673332F29DB84360B4C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Lickety Split		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016
Mailing Address Ronald Reagan Washington National		Amount of Each Disbursement this Period 19.86
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Travel	<input checked="" type="checkbox"/> Memo Item
Candidate Name	002 Category/ Type	Transaction ID : BE2C53EA8ACA34D8DB07
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. VTS Taxi		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016
Mailing Address 7902 NW 36th St		Amount of Each Disbursement this Period 55.00
City Doral	State FL	
Zip Code 33166-6637	Purpose of Disbursement Taxi	<input checked="" type="checkbox"/> Memo Item
Candidate Name	002 Category/ Type	Transaction ID : B94957446697C4546945
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 25.00
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Airfare fee	<input checked="" type="checkbox"/> Memo Item
Candidate Name	002 Category/ Type	Transaction ID : B411169F0E86B4C0C850
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016
Mailing Address PO Box 06649		Amount of Each Disbursement this Period 441.10
City Chicago	State IL Zip Code 60606-0649	
Purpose of Disbursement Airfare	Category/Type 002	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B9DCB3BC1D88C46D3BF4
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Jet Blue Airways		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2016
Mailing Address 4200 Genesee Street		Amount of Each Disbursement this Period 20.00
City Buffalo	State NY Zip Code 14225-1941	
Purpose of Disbursement Travel fee	Category/Type 002	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : BAA831518D97048C983D
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Blacklane		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2016
Mailing Address JFK Airport		Amount of Each Disbursement this Period 94.99
City Jamaica	State NY Zip Code 11430	
Purpose of Disbursement Car service	Category/Type 002	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B3D1EF8F41AD14808A5C
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Emma, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2016
Mailing Address 2120 8th Avenue S		Amount of Each Disbursement this Period 32.63
City Nashville	State TN Zip Code 37204-2204	
Purpose of Disbursement Monthly email	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : BF88D54AA72E54346925
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Ritz Carlton		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2016
Mailing Address 4750 Amelia Island Parkway		Amount of Each Disbursement this Period 610.48
City Fernandina Beach	State FL Zip Code 32034-5501	
Purpose of Disbursement Hotel	Category/Type 002	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B5CFC3B86F6034395A92
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Chili's Grill		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2016
Mailing Address 100 Marketplace Drive		Amount of Each Disbursement this Period 38.36
City Rochester	State NY Zip Code 14623-6014	
Purpose of Disbursement Campaign lunch	Category/Type 003	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : BF789B73AA0CB47FAAA9
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2016
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 175.00
City Newark	State NJ	
Zip Code 07101-1270	Purpose of Disbursement Credit card fee	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : BD3D84CA5942845F7894
State: District:		

Full Name (Last, First, Middle Initial) B. Flash Cab		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2016
Mailing Address 4586 3rd Avenue		Amount of Each Disbursement this Period 45.93
City Bronx	State NY	
Zip Code 10458-7802	Purpose of Disbursement Taxi	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B4D64D53994F84A97919
State: District:		

Full Name (Last, First, Middle Initial) c. Walmart		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2016
Mailing Address 5033 Transit Road		Amount of Each Disbursement this Period 126.63
City Williamsville	State NY	
Zip Code 14221-4132	Purpose of Disbursement Supplies	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B12EF4FEDBA364728A59
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 82			
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Accurate Word		Date of Disbursement MM / DD / YYYY 05 / 05 / 2016
Mailing Address 4481 White Plains Ln		Amount of Each Disbursement this Period 551.25
City White Plains	State MD	
Purpose of Disbursement Printing	Zip Code 20695-3018	<input type="checkbox"/> 006 Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement MM / DD / YYYY 05 / 06 / 2016
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 178.20
City Atlanta	State GA	
Purpose of Disbursement Airfare	Zip Code 30320-6001	<input type="checkbox"/> 002 Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) c. Angry Buffalo		Date of Disbursement MM / DD / YYYY 05 / 10 / 2016
Mailing Address 2753 Wehrle Drive		Amount of Each Disbursement this Period 27.37
City Williamsville	State NY	
Purpose of Disbursement Fundraising lunch	Zip Code 14221-7333	<input type="checkbox"/> 003 Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 82			
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Mastro's		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2016
Mailing Address 600 15th St NW		Amount of Each Disbursement this Period 329.70
City Arlington	State VA	
Zip Code 22205	Purpose of Disbursement Fundraising dinner	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type 003	Transaction ID : BA10596544B4142A4A0D
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Radisson Hotel		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2016
Mailing Address 120 E Main Street		Amount of Each Disbursement this Period 10.00
City Rochester	State NY	
Zip Code 14604-1699	Purpose of Disbursement Parking	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type 002	Transaction ID : B22F1BF5539A14F48BD6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Gula Graham		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2016
Mailing Address 499 South Capitol Street SW Ste 420		Amount of Each Disbursement this Period 18487.23
City Washington	State DC	
Zip Code 20003-4027	Purpose of Disbursement Reimbursement	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : B8DB25FDF5D1040A8A98
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	18487.23
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 82			
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Uber			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2016		
Mailing Address 633 West 27th Street 3rd Floor			Amount of Each Disbursement this Period 213.52		
City New York	State NY	Zip Code 10001-1171	<input checked="" type="checkbox"/> Memo Item		
Purpose of Disbursement Travel		Category/ Type 002	Transaction ID : BAFAD3FFCD0C54D62A74		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

Full Name (Last, First, Middle Initial) B. Uber			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2016		
Mailing Address 633 West 27th Street 3rd Floor			Amount of Each Disbursement this Period 10.21		
City New York	State NY	Zip Code 10001-1171	<input checked="" type="checkbox"/> Memo Item		
Purpose of Disbursement Travel		Category/ Type 002	Transaction ID : BBBD9EE5875414FCA853		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

Full Name (Last, First, Middle Initial) C. American Airlines			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016		
Mailing Address 4333 Amon Carter Blvd.			Amount of Each Disbursement this Period 178.20		
City Ft Worth	State TX	Zip Code 76155-2605	<input checked="" type="checkbox"/> Memo Item		
Purpose of Disbursement Travel fee		Category/ Type 002	Transaction ID : B33E81CCCA2EE4646B42		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. FedEx			Date of Disbursement MM / DD / YYYY 04 / 04 / 2016	
Mailing Address 525 Seventh Avenue			Amount of Each Disbursement this Period 25.38	
City New York	State NY	Zip Code 10018	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement Shipping		Category/ Type 001	Transaction ID : B306E308BAEF64F7D8E9	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. FedEx			Date of Disbursement MM / DD / YYYY 04 / 05 / 2016	
Mailing Address 525 Seventh Avenue			Amount of Each Disbursement this Period 25.38	
City New York	State NY	Zip Code 10018	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement Shipping		Category/ Type 001	Transaction ID : B04573EBA2C7A4EA5A60	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Washington Nationals			Date of Disbursement MM / DD / YYYY 04 / 11 / 2016	
Mailing Address 1500 South Capitol Street SE			Amount of Each Disbursement this Period 3486.80	
City Washington	State DC	Zip Code 20003-3599	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement Campaign event		Category/ Type 007	Transaction ID : B6C04FB04041F43C0B71	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2016
Mailing Address 4333 Amon Carter Blvd.		Amount of Each Disbursement this Period 309.20
City Ft Worth	State TX	
Zip Code 76155-2605	Purpose of Disbursement Airfare	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : BF64E41D379024796846
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Anthony Travel		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2016
Mailing Address 7920 Belt Line Road Suite 1010		Amount of Each Disbursement this Period 10686.00
City Dallas	State TX	
Zip Code 75254-8630	Purpose of Disbursement Travel expense	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : BAFCD5B260535485AA98
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Uber		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2016
Mailing Address 633 West 27th Street 3rd Floor		Amount of Each Disbursement this Period 57.75
City New York	State NY	
Zip Code 10001-1171	Purpose of Disbursement Travel	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : B9F50AD0140AD4438B54
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 82			
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Menus Catering		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2016
Mailing Address 655 Taylor St NE		Amount of Each Disbursement this Period 236.33
City Washington	State DC	
Zip Code 20017-2063	Purpose of Disbursement Fundraising lunch	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 007	Transaction ID : B77DBE5B2EF5B4FB1B39
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Anthony Travel		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2016
Mailing Address 7920 Belt Line Road Suite 1010		Amount of Each Disbursement this Period 2685.00
City Dallas	State TX	
Zip Code 75254-8630	Purpose of Disbursement Travel expense	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : B186CAAD995414FEF92B
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Uber		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2016
Mailing Address 633 West 27th Street 3rd Floor		Amount of Each Disbursement this Period 100.19
City New York	State NY	
Zip Code 10001-1171	Purpose of Disbursement Travel	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : B5752BA1537EC4C5D932
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Anthony Travel		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2016
Mailing Address 7920 Belt Line Road Suite 1010		Amount of Each Disbursement this Period 550.00
City Dallas	State TX Zip Code 75254-8630	
Purpose of Disbursement Travel expense	Category/Type 002	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B9A953C9B4CAA47D39FD
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016
Mailing Address 633 West 27th Street 3rd Floor		Amount of Each Disbursement this Period 38.70
City New York	State NY Zip Code 10001-1171	
Purpose of Disbursement Travel	Category/Type 002	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : BD4366E7B85954CA1A84
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Uber		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016
Mailing Address 633 West 27th Street 3rd Floor		Amount of Each Disbursement this Period 23.90
City New York	State NY Zip Code 10001-1171	
Purpose of Disbursement Travel	Category/Type 002	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B07A3B7D9FF604BA49A2
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 82			
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement MM / DD / YYYY 04 / 29 / 2016
Mailing Address 633 West 27th Street 3rd Floor		Amount of Each Disbursement this Period 84.40
City New York	State NY	
Zip Code 10001-1171	Purpose of Disbursement Travel	<input checked="" type="checkbox"/> Memo Item
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B7E0D745401054CC995E
State: District:		

Full Name (Last, First, Middle Initial) B. Gula Graham		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 499 South Capitol Street SW Ste 420		Amount of Each Disbursement this Period 2089.57
City Washington	State DC	
Zip Code 20003-4027	Purpose of Disbursement Reimbursement	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : BBBB3DA52FB2C4D04804
State: District:		

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement MM / DD / YYYY 04 / 08 / 2016
Mailing Address 525 Seventh Avenue		Amount of Each Disbursement this Period 16.34
City New York	State NY	
Zip Code 10018	Purpose of Disbursement Shipping	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B61AC9DB7E8E64509952
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2089.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 82	
	<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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Good Stuff Eatery		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016
Mailing Address 303 Pennsylvania Ave. SE		Amount of Each Disbursement this Period 194.25
City Washington State DC Zip Code 20003-1148	Purpose of Disbursement Event lunch	
Candidate Name	Category/Type 007	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : BD6D35739BD444C96A6F
State: District:		

Full Name (Last, First, Middle Initial) B. Acqua AI 2		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2016
Mailing Address 212 7th Street SE		Amount of Each Disbursement this Period 1853.60
City Washington State DC Zip Code 20003-4311	Purpose of Disbursement Event cost	
Candidate Name	Category/Type 007	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B04340DC9B66248A2842
State: District:		

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016
Mailing Address 525 Seventh Avenue		Amount of Each Disbursement this Period 25.38
City New York State NY Zip Code 10018	Purpose of Disbursement Shipping	
Candidate Name	Category/Type 001	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B70D75E8D39644E009E0
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	38324.34

**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 82			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Thomas M Montante			Date of Disbursement MM / DD / YYYY 06 / 07 / 2016	
Mailing Address 4324 Lower River Rd			Amount of Each Disbursement this Period 2000.00	
City Youngstown	State NY	Zip Code 14174-9754	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Refund: Refund, contribution over the limit		Category/ Type 010	Transaction ID : BFCB047DDE7DD443C85B	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B.			Date of Disbursement MM / DD / YYYY	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code	Memo Item <input type="checkbox"/>	
Purpose of Disbursement		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C.			Date of Disbursement MM / DD / YYYY	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code	Memo Item <input type="checkbox"/>	
Purpose of Disbursement		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 82	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Doug Peters		Date of Disbursement MM / DD / YYYY 06 / 03 / 2016
Mailing Address 2000 W Jefferson Road		Amount of Each Disbursement this Period 28.00
City Rochester	State NY Zip Code 14623	
Purpose of Disbursement Service Academy dinner	Category/Type 012	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B421159283E3B493BAA7
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Erie County Federation of Republican Women		Date of Disbursement MM / DD / YYYY 05 / 02 / 2016
Mailing Address PO Box 293		Amount of Each Disbursement this Period 55.00
City Buffalo	State NY Zip Code 14240-0293	
Purpose of Disbursement Reception	Category/Type 011	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : BB0EFA8F6557E44D6A30
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Batavia BID		Date of Disbursement MM / DD / YYYY 04 / 19 / 2016
Mailing Address 200 East Main Street #11		Amount of Each Disbursement this Period 20.00
City Batavia	State NY Zip Code 14020-2200	
Purpose of Disbursement Luncheon	Category/Type 012	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B4BED5BDBFFB543979BC
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	103.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 82
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Collins for Congress

Full Name (Last, First, Middle Initial) A. The Arc of Livingston-Wyoming		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2016
Mailing Address 18 Main Street		Amount of Each Disbursement this Period 25.00
City Mount Morris	State NY	
Zip Code 14510-1036	Purpose of Disbursement Luncheon	<input type="checkbox"/> Memo Item
Candidate Name	012 Category/ Type	Transaction ID : B6F90C94336A6403291F
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Genesee County Republican Women's Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address 124 Trumbull Parkway		Amount of Each Disbursement this Period 20.00
City Batavia	State NY	
Zip Code 14020-2618	Purpose of Disbursement Lunch	<input type="checkbox"/> Memo Item
Candidate Name	011 Category/ Type	Transaction ID : B12FDF3601AC24EA585C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. NYS Independence Party		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2016
Mailing Address PO Box 7204		Amount of Each Disbursement this Period 1000.00
City Albany	State NY	
Zip Code 12224-0204	Purpose of Disbursement Fundraising dinner	<input type="checkbox"/> Memo Item
Candidate Name	011 Category/ Type	Transaction ID : BBDB51DC5385540CF824
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1045.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 82
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Leadership Niagara		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2016
Mailing Address 1623 Military Road #332		Amount of Each Disbursement this Period 60.00
City Niagara Falls	State NY	
Zip Code 14304-1745	Purpose of Disbursement Luncheon	<input type="checkbox"/> Memo Item
Candidate Name	012 Category/ Type	Transaction ID : B814DE48AE8124567AC8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Evans Brant Chamber of Commerce		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2016
Mailing Address 70 North Main Street		Amount of Each Disbursement this Period 35.00
City Angola	State NY	
Zip Code 14006-1316	Purpose of Disbursement Dinner	<input type="checkbox"/> Memo Item
Candidate Name	012 Category/ Type	Transaction ID : B4F7C9496F01B428DA15
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Canandaigua Chamber of Commerce		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2016
Mailing Address 113 S Main Street		Amount of Each Disbursement this Period 30.00
City Canandaigua	State NY	
Zip Code 14424-1903	Purpose of Disbursement Luncheon	<input type="checkbox"/> Memo Item
Candidate Name	012 Category/ Type	Transaction ID : B1D64E64A6A8E448E9F1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 82	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Clarence Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2016
Mailing Address PO Box 207		Amount of Each Disbursement this Period 100.00
City Clarence	State NY	
Zip Code 14031-0207	Purpose of Disbursement Reception	<input type="checkbox"/> Memo Item
Candidate Name	011 Category/ Type	Transaction ID : BB95D9F369E614933B56
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Monroe County Conservative Party		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 7 State Street		Amount of Each Disbursement this Period 1290.00
City Pittsford	State NY	
Zip Code 14534-2027	Purpose of Disbursement Fundraising event	<input type="checkbox"/> Memo Item
Candidate Name	011 Category/ Type	Transaction ID : B9745080AAF9940EA9E2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Wyoming County Republican Women		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2016
Mailing Address 172 W Buffalo St		Amount of Each Disbursement this Period 22.00
City Warsaw	State NY	
Zip Code 14569-1213	Purpose of Disbursement Brunch	<input type="checkbox"/> Memo Item
Candidate Name	011 Category/ Type	Transaction ID : B4812787C53C54DDE9D4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1412.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 82			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" 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)
Collins for Congress

Full Name (Last, First, Middle Initial) A. Conservative Party of Genesee County		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2016
Mailing Address PO Box 1686		Amount of Each Disbursement this Period 60.00 <input type="checkbox"/> Memo Item
City Batavia	State NY	
Zip Code 14021-1686	Purpose of Disbursement Fundraising dinner	Transaction ID : B472A9A71D09B47C4904
Candidate Name	011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Genesee County Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2016
Mailing Address PO Box 171		Amount of Each Disbursement this Period 450.00 <input type="checkbox"/> Memo Item
City Batavia	State NY	
Zip Code 14021-0171	Purpose of Disbursement Event contribution	Transaction ID : B7D81BCE152D04944BC9
Candidate Name	011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Orleans County Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2016
Mailing Address 3132 Hulberton Road		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item
City Holley	State NY	
Zip Code 14470-9371	Purpose of Disbursement Fundraiser	Transaction ID : B0932FDF254EC49C6B78
Candidate Name	011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1510.00
TOTAL This Period (last page this line number only).....	4195.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Collins for Congress** Transaction ID : **CADDA0FBD2FDC4104B4F**

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
Christopher C Collins

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
 9660 Cobblestone Drive

City State ZIP Code
 Clarence NY 14031-1576

Original Amount of Loan 150000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 150000.00
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TERMS

Date Incurred: M 09 / D 13 / Y 2012
 Date Due: M / D / Y None
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 150000.00

TOTALS This Period (last page in this line only)..... ▶ []

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Collins for Congress** Transaction ID : **CD6966E78E5E34DEAB2D**

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
Christopher C Collins

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
 9660 Cobblestone Drive

City State ZIP Code
 Clarence NY 14031-1576

Original Amount of Loan 245500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 245500.00
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TERMS

Date Incurred: M 04 / D 17 / Y 2012
 Date Due: M / D / Y None
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 245500.00

TOTALS This Period (last page in this line only)..... ▶ []

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Collins for Congress** Transaction ID : C9E094F9391454CCCFB

LOAN SOURCE Full Name (Last, First, Middle Initial) *PERSONAL FUNDS* Memo Item
Christopher C Collins

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
 9660 Cobblestone Drive

City State ZIP Code
 Clarence NY 14031-1576

Original Amount of Loan 4500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 4500.00
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TERMS

Date Incurred: M 03 / D 26 / Y 2012
 Date Due: M / D / Y None
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 4500.00

TOTALS This Period (last page in this line only)..... ▶ []

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Collins for Congress** Transaction ID : C5E5B67318DC24682866

LOAN SOURCE Full Name (Last, First, Middle Initial) *PERSONAL FUNDS* Memo Item
Christopher C Collins

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
 9660 Cobblestone Drive

City State ZIP Code
 Clarence NY 14031-1576

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
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TERMS

Date Incurred: M 08 / D 30 / Y 2012
 Date Due: M / D / Y None
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional).....	100000.00
TOTALS This Period (last page in this line only).....	500000.00

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