

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Citizens for Boyle

ADDRESS (number and street)

499 S. Capitol St. SW

Suite 422

Check if different than previously reported. (ACC)

Washington

DC

20003

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00543363

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

PA

13

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

11 /

08 /

2016

in the State of

PA

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

General (30G)

Runoff (30R)

Special (30S)

Election on

/

/

/

in the State of

/

5. Covering Period

10 /

01 /

2016

through

10 /

19 /

2016

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

Angerholzer, Lindsay, F., ,

Type or Print Name of Treasurer

Signature of Treasurer

Angerholzer, Lindsay, F., ,

[Electronically Filed]

Date

10 /

24 /

2016

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

Office Use Only

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Citizens for Boyle

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	25425.00	1030949.24
(b) Total Contribution Refunds (from Line 20(d))	0.00	1320.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	25425.00	1029629.24
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6121.74	459459.35
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	689.64
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	6121.74	458769.71
8. Cash on Hand at Close of Reporting Period (from Line 27).....	490692.58	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Citizens for Boyle

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13400.00	342314.50
(ii) Unitemized.....	25.00	13854.29
(iii) TOTAL of contributions from individuals ▶	13425.00	356168.79
(b) Political Party Committees.....	0.00	2708.67
(c) Other Political Committees (such as PACs).....	12000.00	670850.00
(d) The Candidate.....	0.00	1221.78
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	25425.00	1030949.24
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	689.64
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	4170.16
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	25425.00	1035809.04

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 23

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6121.74	459459.35
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	40000.00
(b) Of All Other Loans	0.00	5481.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	45481.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	320.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1320.00
21. OTHER DISBURSEMENTS	25000.00	451606.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	31121.74	957866.35

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	496389.32
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	25425.00
25. SUBTOTAL (add Line 23 and Line 24).....	521814.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	31121.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	490692.58

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

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

FOR LINE NUMBER: PAGE 5 OF 23
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Anapol, Thomas, R., ,
Mailing Address 425 Mulberry Lane

City Haverford State PA Zip Code 19041

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

Name of Employer Anapol Schwartz Occupation Shareholder

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
10 / 06 / 2016

Transaction ID : **C10704939**

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Beaser, Lawrence, , ,
Mailing Address 834 Chestnut Street
Apt PH-121

City Philadelphia State PA Zip Code 19107

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

Name of Employer Blank Rome LLP Occupation Attorney

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
10 / 06 / 2016

Transaction ID : **C10704968**

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Bendesky, Larry, , ,
Mailing Address 733 Cherry Circle

City Wynnewood State PA Zip Code 19096

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

Name of Employer Saltz Mongeluzzi Barrett & Bendesky Occupation Attorney

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
10 / 06 / 2016

Transaction ID : **C10704940**

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00

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

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

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

FOR LINE NUMBER: PAGE 6 OF 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Caramanico, Thomas, A., ,
 Mailing Address 848 Buck Lane
 City Haverford State PA Zip Code 19041-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer McCormick Taylor Occupation P.E.
 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
 10 06 2016
Transaction ID : C10704941
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Chacker, Edward, , ,
 Mailing Address 1731 Spring Garden St
 City Phila State PA Zip Code 19130-3915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gay Chacker Mittin PC Occupation Lawyer
 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
 10 06 2016
Transaction ID : C10704942
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Cohan, Lawrence, R., ,
 Mailing Address 1336 Colton Road
 City Gladwyne State PA Zip Code 19035-1138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Anapol schwartz Occupation Attorney
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 06 2016
Transaction ID : C10704943
 Amount of Each Receipt this Period
 750.00
 Memo Item

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

1500.00

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

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

FOR LINE NUMBER: PAGE 7 OF 23
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Cohen, David, L., Esq.

Mailing Address One Comcast Center

City Philadelphia State PA Zip Code 19103

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

Name of Employer Comcast Occupation Vice President

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
10 / 11 / 2016

Transaction ID : C10704944

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 160 Shelly Lane

City Philadelphia State PA Zip Code 19115-2709

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

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

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
10 / 06 / 2016

Transaction ID : C10704945

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DeCree, Louis, J., Jr.

Mailing Address 13037 Lindsay Street

City Philadelphia State PA Zip Code 19116-1715

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

Name of Employer Arch Insurance Group Occupation VP, Ceded Reinsurance Claims

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2016

Transaction ID : C10704947

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3950.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Feldman, Alan, M., ,
 Mailing Address 435 Bryn Mawr Avenue
 City Bala Cynwyd State PA Zip Code 19004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Feldman Shepherd Occupation Attorney
 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
 10 / 06 / 2016
Transaction ID : C10704949
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Feldman, Charles, E., ,
 Mailing Address 9679 Pine Rd
 City Philadelphia State PA Zip Code 19115-2747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Garden of Earthly Delights Occupation Retail Store owner
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2016
Transaction ID : C10704950
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Kilkenny, Sean, , ,
 Mailing Address 715 Washington Ln
 City Jenkintown State PA Zip Code 19046-2953
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Law Offices of Sean Kilkenny Occupation Attorney
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2016
Transaction ID : C10700509
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 9 OF 23
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Lawn, Timothy, , ,

Mailing Address 1845 Walnut St
20th Floor

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

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

Name of Employer Raynes McCarty	Occupation Attorney
------------------------------------	------------------------

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
10 / 06 / 2016

Transaction ID : C10704952

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 2711 Dudley Street

City Philadelphia	State PA	Zip Code 19145
----------------------	-------------	-------------------

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

Name of Employer Lindy Li for Congress	Occupation Candidate
---	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2016

Transaction ID : C10704953

Amount of Each Receipt this Period
1700.00

Memo Item

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

Mailing Address 815 Pardee Ln

City Wyncote	State PA	Zip Code 19095-1609
-----------------	-------------	------------------------

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

Name of Employer Revere Suburban Realty	Occupation Real Estate Professional
--	--

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2016

Transaction ID : C10701641

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	2450.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 23
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 1201 F St NW
Ste 500

City Washington State DC Zip Code 20004-1225

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

Name of Employer Savills Studley Occupation Real Estate

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
10 / 10 / 2016

Transaction ID : C10703701

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1845 Walnut Street, 21st Floor

City Philadelphia State PA Zip Code 19103

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

Name of Employer Feldman, Shepherd, Wohlgelernter, Tann Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2016

Transaction ID : C10704957

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1617 John F Kennedy Blvd
Fl 19

City Philadelphia State PA Zip Code 19103-1833

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2016

Transaction ID : C10704955

Amount of Each Receipt this Period
1000.00

Memo Item

PARTNERSHIP--partners below if itemized

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 11 OF 23	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 1617 John F Kennedy Blvd
FI 19

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

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

Name of Employer Obermayer Rebmann Maxwell & Hippel LLP	Occupation Attorney
--	------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2016

Transaction ID : **C10704956**

Amount of Each Receipt this Period
1000.00

Memo Item

*

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	13400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 23	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
AECOM PAC

Mailing Address 2450 CRYSTAL DRIVE
SUITE 500

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00374447

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
10 / 05 / 2016

Transaction ID : C10704938

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN CHEMISTRY COUNCIL PAC

Mailing Address 700 2ND STREET, NE
ATTN: ALLISON STARMANN

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00252338

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
10 / 17 / 2016

Transaction ID : C10705399

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 101 NORTH 3RD STREET

City MOORHEAD State MN Zip Code 56560

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2016

Transaction ID : C10704934

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	8000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 1505 PRINCE STREET
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00024968

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
10 19 2016

Transaction ID : C10705398

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

Mailing Address 1111 NORTH FAIRFAX ST.

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00012880

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
10 17 2016

Transaction ID : C10704933

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL MARINE MANUFACTURERS ASSOCIATION AND MARINE RETAILERS ASSOCIATION BOAT POLITICAL

Mailing Address 650 MASSACHUSETTS AVE, NW
SUITE 520

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00245548

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
10 19 2016

Transaction ID : C10705400

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

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

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

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

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)

Mailing Address 9900 BREN ROAD EAST

City MINNETONKA State MN Zip Code 55343

FEC ID number of contributing federal political committee. **C** C00274431

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
10 10 2016

Transaction ID : C10705401

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	12000.00

**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 15 OF 23			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-4285
Purpose of Disbursement Food and Meals		Amount of Each Disbursement this Period 8.75
Candidate Name	Category/ Type	Transaction ID : D542034
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-4285
Purpose of Disbursement Travel Expense		Amount of Each Disbursement this Period 44.00
Candidate Name	Category/ Type	Transaction ID : D542048
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016
Mailing Address 60 Massachusetts Ave NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-4285
Purpose of Disbursement Travel Expense		Amount of Each Disbursement this Period 66.00
Candidate Name	Category/ Type	Transaction ID : D542049
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	118.75
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 16 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2016
Mailing Address PO Box 3002		FEC Identification Number C
City Southeastern	State PA	Zip Code 19398
Purpose of Disbursement Internet	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 44.99	
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) ▼	Transaction ID : D542040
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FirstData		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016
Mailing Address 5565 Glenridge Connector NE Ste 2000		FEC Identification Number C
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fees	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 181.56	
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) ▼	Transaction ID : D542028
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FirstData		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016
Mailing Address 5565 Glenridge Connector NE Ste 2000		FEC Identification Number C
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fees	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 68.22	
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) ▼	Transaction ID : D542029
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	294.77
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 17 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. FirstData		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016
Mailing Address 5565 Glenridge Connector NE Ste 2000		FEC Identification Number C
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Bank Fees	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 25.95	
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) ▼	Transaction ID : D542030
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Ford Credit		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2016
Mailing Address PO Box 542000		FEC Identification Number C
City Omaha	State NE	Zip Code 68154-8000
Purpose of Disbursement Automobile Lease	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 569.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D542023
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Glen Foerd on the Delaware		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2016
Mailing Address 5001 Grant Avenue		FEC Identification Number C
City Philadelphia	State PA	Zip Code 19114
Purpose of Disbursement Fundraiser Venue Expense	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 300.00	
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) ▼	Transaction ID : D542027
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	894.95
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 18 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Jamie Hollander Catering & Events			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2016	
Mailing Address 415 South York Road			FEC Identification Number C	
City New Hope	State PA	Zip Code 18938	Amount of Each Disbursement this Period 1536.00	
Purpose of Disbursement Fundraiser Catering Expense		Category/ Type	Transaction ID : D542026	
Candidate Name		Memo Item <input type="checkbox"/>		
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. Lodise, Daniel, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2016	
Mailing Address 1101 Morefield Rd			FEC Identification Number C	
City Philadelphia	State PA	Zip Code 19115-2501	Amount of Each Disbursement this Period 1524.92	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : D542044	
Candidate Name		Memo Item <input type="checkbox"/>		
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. NGP VAN Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016	
Mailing Address 1101 15th St. NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20005	Amount of Each Disbursement this Period 775.00	
Purpose of Disbursement Software		Category/ Type	Transaction ID : D542045	
Candidate Name		Memo Item <input type="checkbox"/>		
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:				

SUBTOTAL of Disbursements This Page (optional).....▶	3835.92
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 19 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. NYC Taxi		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016
Mailing Address 3202 Queens Blvd		FEC Identification Number C
City Long Island City	State NY	Zip Code 11101-2319
Purpose of Disbursement Travel Expense	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 10.75	
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) ▼	Transaction ID : D542047
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016
Mailing Address 10000 Roosevelt Blvd #4		FEC Identification Number C
City Philadelphia	State PA	Zip Code 19116
Purpose of Disbursement Telephone Expense	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 193.29	
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) ▼	Transaction ID : D542039
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Wawa		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016
Mailing Address Red Roof, 260 W. Baltimore Pike		FEC Identification Number C
City Media	State PA	Zip Code 19063
Purpose of Disbursement Automobile Expense	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 21.49	
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) ▼	Transaction ID : D542021
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	225.53
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 20 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Wawa		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016
Mailing Address Red Roof, 260 W. Baltimore Pike		FEC Identification Number C
City Media	State PA	Zip Code 19063
Purpose of Disbursement Automobile Expense		Amount of Each Disbursement this Period 19.10
Candidate Name		Transaction ID : D542022
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Wells Fargo Bank, NA		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016
Mailing Address PO Box 6995		FEC Identification Number C
City Portland	State OR	Zip Code 97228-6995
Purpose of Disbursement Bank Fee		Amount of Each Disbursement this Period 10.00
Candidate Name		Transaction ID : D542031
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Wells Fargo Bank, NA		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016
Mailing Address PO Box 6995		FEC Identification Number C
City Portland	State OR	Zip Code 97228-6995
Purpose of Disbursement Bank Fee		Amount of Each Disbursement this Period 3.00
Candidate Name		Transaction ID : D542032
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	32.10
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 21 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Wells Fargo Bank, NA			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016	
Mailing Address PO Box 6995			FEC Identification Number C	
City Portland	State OR	Zip Code 97228-6995	Amount of Each Disbursement this Period 10.00	
Purpose of Disbursement Bank Fee		Category/Type	Transaction ID : D542033	
Candidate Name		Memo Item <input type="checkbox"/>		
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. Wonderful World of Wines			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2016	
Mailing Address 8 South Union Street			FEC Identification Number C	
City Lambertville	State NJ	Zip Code 08530	Amount of Each Disbursement this Period 290.82	
Purpose of Disbursement Fundraiser Catering Expense		Category/Type	Transaction ID : D542025	
Candidate Name		Memo Item <input type="checkbox"/>		
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. Boyle, Brendan, , Rep,			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2016	
Mailing Address 15040 Kelvin Ave.			FEC Identification Number C H4PA13199	
City Philadelphia	State PA	Zip Code 19116	Amount of Each Disbursement this Period 174.52	
Purpose of Disbursement Reimbursement		Category/Type	Transaction ID : D542041	
Candidate Name Boyle, Brendan, , Rep,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" 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: PA District: 13				

SUBTOTAL of Disbursements This Page (optional).....▶	475.34
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 22 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Boyle, Brendan, , Rep,		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2016
Mailing Address 15040 Kelvin Ave.		FEC Identification Number C H4PA13199
City Philadelphia	State PA	Zip Code 19116
Purpose of Disbursement Parking Reimbursement		Amount of Each Disbursement this Period 19.00
Candidate Name Boyle, Brendan, , Rep,		Transaction ID : D542042
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2016	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: PA	District: 13	

Full Name (Last, First, Middle Initial) B. Boyle, Brendan, , Rep,		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2016
Mailing Address 15040 Kelvin Ave.		FEC Identification Number C H4PA13199
City Philadelphia	State PA	Zip Code 19116
Purpose of Disbursement Mileage Reimbursement		Amount of Each Disbursement this Period 155.52
Candidate Name Boyle, Brendan, , Rep,		Transaction ID : D542043
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2016	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: PA	District: 13	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House	Disbursement For:	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	5877.36

**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 23 OF 23	
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2016	
Mailing Address 430 S Capitol Street, SE			FEC Identification Number C C0000935	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 25000.00	
Purpose of Disbursement Political Donation		Category/ Type		
Candidate Name		Transaction ID : D542024		
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) ▼		Memo Item	
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type		
Candidate Name		Memo Item		
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 M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type		
Candidate Name		Memo Item		
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).....▶	25000.00
TOTAL This Period (last page this line number only).....▶	25000.00