

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

Doyle for Congress Committee

ADDRESS (number and street)

205 Hawthorne Court

Check if different than previously reported. (ACC)

Pittsburgh

PA

15221

2. FEC IDENTIFICATION NUMBER

C C00290064

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

PA

14

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

X April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y 01 / 01 / 2015

through

M M / D D / Y Y Y Y 03 / 31 / 2015

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 Karen S. Oleyar

Signature of Treasurer Karen S. Oleyar

[Electronically Filed]

Date

M M / D D / Y Y Y Y 04 / 06 / 2015

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

Doyle for Congress Committee

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))....	47701.00	51268.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	47701.00	51268.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	49930.32	74544.34
(b) Total Offsets to Operating Expenditures (from Line 14).....	216.20	410.90
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	49714.12	74133.44
8. Cash on Hand at Close of Reporting Period (from Line 27).....	196113.15	
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 12/2003)

Write or Type Committee Name

Doyle for Congress Committee

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).....	1001.00	2351.00
(ii) Unitemized.....	0.00	217.00
(iii) TOTAL of contributions from individuals ▶	1001.00	2568.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	46700.00	48700.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	47701.00	51268.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	216.20	410.90
15. OTHER RECEIPTS (Dividends, Interest, etc.)	194.69	360.10
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	48111.89	52039.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	49930.32	74544.34
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	12600.00	17060.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	62530.32	91604.34

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	210531.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	48111.89
25. SUBTOTAL (add Line 23 and Line 24).....	258643.47
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	62530.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	196113.15

**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 53
	<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	

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)
Doyle for Congress Committee

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

Mailing Address 106 S. Linden Avae.

City Pittsburgh State PA Zip Code 15208

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

Name of Employer Carnegie Mellon University Occupation Spec. Asst. to the Provost

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **334.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 22 / 2015

Transaction ID : 50125.C11022

Amount of Each Receipt this Period
167.00

Earmarked(Receipt)

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

Mailing Address 106 S. Linden Avae.

City Pittsburgh State PA Zip Code 15208

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

Name of Employer Carnegie Mellon University Occupation Spec. Asst. to the Provost

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **501.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 09 / 2015

Transaction ID : 50406.C11029

Amount of Each Receipt this Period
167.00

Earmarked(Receipt)

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

Mailing Address 106 S. Linden Avae.

City Pittsburgh State PA Zip Code 15208

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

Name of Employer Carnegie Mellon University Occupation Spec. Asst. to the Provost

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **668.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : 50406.C11034

Amount of Each Receipt this Period
167.00

Earmarked(Receipt)

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

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

501.00

**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 53
	<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)
Doyle for Congress Committee

A. Full Name (Last, First, Middle Initial)
Debra Tekavec

Mailing Address 3607 16th St. S

City State Zip Code
Arlington VA 22204

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

Name of Employer Occupation
Carnegie Mellon University Dir. of Federal Relations

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
03 / 26 / 2015

Transaction ID : 50406.C11040

Amount of Each Receipt this Period
 Receipt
500.00

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

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

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

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

500.00

1001.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 53
	<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)
Doyle for Congress Committee

A. AAJ PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 777 6th St. NW Ste. 200
 City Washington State DC Zip Code 20001
 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
 03 / 30 / 2015
Transaction ID : 50406.C11046
 Amount of Each Receipt this Period
 Receipt 1000.00

B. AANP PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address American Academy of Nurse Practiti
 P.O. Box 12846
 City Austin State TX Zip Code 78711
 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
 01 / 11 / 2015
Transaction ID : 50118.C11021
 Amount of Each Receipt this Period
 Receipt 1000.00

C. ACRE PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address Action Com. for Rural Electrificat
 4301 Wilson Blvd.
 City Arlington State VA Zip Code 22203
 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
 03 / 26 / 2015
Transaction ID : 50406.C11060
 Amount of Each Receipt this Period
 Receipt 1000.00

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 8 OF 53
	<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)
Doyle for Congress Committee

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

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2015

Transaction ID : 50125.C11023

Amount of Each Receipt this Period
167.00

Memo
[MEMO ITEM]

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

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2015

Transaction ID : 50406.C11030

Amount of Each Receipt this Period
167.00

Memo
[MEMO ITEM]

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

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2015

Transaction ID : 50406.C11035

Amount of Each Receipt this Period
167.00

Memo
[MEMO ITEM]

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

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

0.00

**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 9 OF 53
	<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)
Doyle for Congress Committee

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

Mailing Address **Palladian Corporate Center 1
220 Leigh Farm Road**

City **Durham** State **NC** Zip Code **27707-8110**

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
03 / 30 / 2015

Transaction ID : 50406.C11051

Amount of Each Receipt this Period
 Receipt **1000.00**

B. Full Name (Last, First, Middle Initial)
Airline Pilots Assoc PAC

Mailing Address **1625 Massachusetts Ave., NW**

City **Washington** State **DC** Zip Code **20036**

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
03 / 30 / 2015

Transaction ID : 50406.C11044

Amount of Each Receipt this Period
 Receipt **1000.00**

C. Full Name (Last, First, Middle Initial)
American Cable Association PAC

Mailing Address **One Parkway Center, Suite 212
875 Greentree Road**

City **Pittsburgh** State **PA** Zip Code **15220-3505**

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
03 / 30 / 2015

Transaction ID : 50406.C11052

Amount of Each Receipt this Period
 Receipt **1000.00**

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 10 OF 53
	<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)
Doyle for Congress Committee

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

Mailing Address 2200 Pennsylvania Ave., NW
Suite 660W

City Washington State DC Zip Code 20037

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
 03 / 30 / 2015

Transaction ID : 50406.C11043

Amount of Each Receipt this Period
 Receipt 1000.00

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

Mailing Address Committee for Effective Government
1 Oxford Center, 20th Floor

City Pittsburgh State PA Zip Code 15219-1410

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
 03 / 30 / 2015

Transaction ID : 50406.C11048

Amount of Each Receipt this Period
 Receipt 1000.00

C. Full Name (Last, First, Middle Initial)
Comcast Corp. & NBCUniversal PAC

Mailing Address One Comcast Center
1701 JFK Boulevard

City Philadelphia State PA Zip Code 19103

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
 03 / 25 / 2015

Transaction ID : 50406.C11055

Amount of Each Receipt this Period
 Receipt 1000.00

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 11 OF 53
	<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)
Doyle for Congress Committee

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

Mailing Address 2345 Crystal Drive, Ste. 800

City State Zip Code
Arlington VA 22202

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
 03 / 30 / 2015

Transaction ID : 50406.C11053

Amount of Each Receipt this Period
 Receipt 1000.00

B. Full Name (Last, First, Middle Initial)
Friends of Rich Fitzgerald

Mailing Address 1314 Denniston Street

City State Zip Code
Pittsburgh PA 15217

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
 03 / 31 / 2015

Transaction ID : 50406.C11062

Amount of Each Receipt this Period
 Receipt 2600.00

C. Full Name (Last, First, Middle Initial)
Friends of Rich Fitzgerald

Mailing Address 1314 Denniston Street

City State Zip Code
Pittsburgh PA 15217

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
 03 / 31 / 2015

Transaction ID : 50406.C11061

Amount of Each Receipt this Period
 Receipt 5200.00

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

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

6200.00

**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 53
	<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)
Doyle for Congress Committee

A. Full Name (Last, First, Middle Initial)
General Dynamics Corp. PAC

Mailing Address 2941 Fairview Drive, #100

City Falls Church State VA Zip Code 22042

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
 03 / 30 / 2015

Transaction ID : 50406.C11045

Amount of Each Receipt this Period
 Receipt 1000.00

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

Mailing Address c/o National Football League
345 Park Avenue

City New York State NY Zip Code 10154

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
 03 / 27 / 2015

Transaction ID : 50406.C11059

Amount of Each Receipt this Period
 Receipt 1500.00

C. Full Name (Last, First, Middle Initial)
H.J. Heinz PAC

Mailing Address 1 PPG Place
Suite 3100

City Pittsburgh State PA Zip Code 15222

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
 03 / 30 / 2015

Transaction ID : 50406.C11049

Amount of Each Receipt this Period
 Receipt 1000.00

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 13 OF 53
	<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)
Doyle for Congress Committee

A. Full Name (Last, First, Middle Initial)
Internat. Union of Operating Engineers

Mailing Address **Engineers Political Education Comi**
1125 17th Street, NW

City **Washington** State **DC** Zip Code **20036**

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
03 / 20 / 2015

Transaction ID : 50406.C11038

Amount of Each Receipt this Period

5000.00

Receipt

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

Mailing Address **905 16th Street, NW**

City **Washington** State **DC** Zip Code **20006**

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
03 / 19 / 2015

Transaction ID : 50406.C11036

Amount of Each Receipt this Period

2500.00

Receipt

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

Mailing Address **Natl. Cable & Telecom. Assoc.**
25 Massachusetts Avenue, NW

City **Washington** State **DC** Zip Code **20001**

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
03 / 30 / 2015

Transaction ID : 50406.C11050

Amount of Each Receipt this Period

1000.00

Receipt

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

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

8500.00

**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 14 OF 53
	<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	

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)
Doyle for Congress Committee

A. Full Name (Last, First, Middle Initial)
Nelson Mullins Riley Scarborough Fed.

Mailing Address Political Committee
PO Box 11070

City Columbia State SC Zip Code 29211-1070

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
 03 / 30 / 2015

Transaction ID : 50406.C11047

Amount of Each Receipt this Period
 Receipt 1000.00

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

Mailing Address 1 State Farm Plz., D-2

City Bloomington State IL Zip Code 61710-0001

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
 03 / 01 / 2015

Transaction ID : 50406.C11032

Amount of Each Receipt this Period
 Receipt 1000.00

C. Full Name (Last, First, Middle Initial)
UA Political Education Committee PAC

Mailing Address 3 Park Place

City Annapolis State MD Zip Code 21401

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
 01 / 23 / 2015

Transaction ID : 50125.C11024

Amount of Each Receipt this Period
 Receipt 5000.00

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 15 OF 53
	<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)
Doyle for Congress Committee

A. Full Name (Last, First, Middle Initial)
UAW V CAP

Mailing Address 8000 East Jefferson Avenue

City Detroit State MI Zip Code 48214-3963

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
 03 / 20 / 2015

Transaction ID : 50406.C11037

Amount of Each Receipt this Period
 Receipt 5000.00

B. Full Name (Last, First, Middle Initial)
United Transportation Union

Mailing Address 14600 Detroit Avenue

City North Olmsted State OH Zip Code 44070

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
 03 / 23 / 2015

Transaction ID : 50406.C11056

Amount of Each Receipt this Period
 Receipt 2500.00

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

Mailing Address 55 Glenlake Parkway, NE

City Atlanta State GA Zip Code 30328

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
 03 / 28 / 2015

Transaction ID : 50406.C11041

Amount of Each Receipt this Period
 Receipt 500.00

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

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

8000.00

**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 53
	<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)
Doyle for Congress Committee

A. UTC Employe PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 Pennsylvania Ave., NW
 10th Floor
 City Washington State DC Zip Code 20004
 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
 03 / 26 / 2015
Transaction ID : 50406.C11058
 Amount of Each Receipt this Period
 Receipt 1000.00

B. Westinghouse Electric Company PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 19th Street, NW
 Suite 350
 City Washington State DC Zip Code 20006
 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
 03 / 26 / 2015
Transaction ID : 50406.C11039
 Amount of Each Receipt this Period
 Receipt 1000.00

C. WSWA PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address Wine & Spirits Wholesalers of Amer
 805 Fifteenth Street, NW Suite 43
 City Washington State DC Zip Code 20005
 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
 03 / 14 / 2015
Transaction ID : 50406.C11033
 Amount of Each Receipt this Period
 Receipt 2500.00

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

4500.00
 46700.00

**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 53
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Doyle for Congress Committee

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

Mailing Address 205 Hawthorne Ct.

City Pittsburgh State PA Zip Code 15221-

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

Name of Employer U.S. House of Representatives Occupation Congressman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **399.90**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2015

Transaction ID : 50406.C11031

Amount of Each Receipt this Period
205.20

Offsets to Operating Expenditu

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

Mailing Address 55 Glenlake Parkway, NE

City Atlanta State GA Zip Code 30328-

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **11.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2015

Transaction ID : 50406.C11042

Amount of Each Receipt this Period
11.00

Offsets to Operating Expenditu

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

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

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

216.20

216.20

**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 53
	<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	

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NAME OF COMMITTEE (In Full)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) Dollar Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 31 / 2015	
Mailing Address 22 Braddock Hills Office 274 Yost Blvd.		Transaction ID : 50406.C11063	
City Pittsburgh	State PA	Zip Code 15221-	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 67.01	
Name of Employer Occupation		Interest Received	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 232.42	

Full Name (Last, First, Middle Initial) Dollar Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 28 / 2015	
Mailing Address 22 Braddock Hills Office 274 Yost Blvd.		Transaction ID : 50406.C11064	
City Pittsburgh	State PA	Zip Code 15221-	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.57	
Name of Employer Occupation		Interest Received	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 292.99	

Full Name (Last, First, Middle Initial) Dollar Bank		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015	
Mailing Address 22 Braddock Hills Office 274 Yost Blvd.		Transaction ID : 50406.C11065	
City Pittsburgh	State PA	Zip Code 15221-	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 67.11	
Name of Employer Occupation		Interest Received	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 360.10	

SUBTOTAL of Receipts This Page (optional).....	194.69
TOTAL This Period (last page this line number only).....	194.69

**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 53	
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2015
Mailing Address P.O. Box 1270		Amount of Each Disbursement this Period 9231.11
City Newark	State NJ	
Zip Code 07101-1270	Purpose of Disbursement Credit card: See Below	Transaction ID : 50125.E12255
Candidate Name	Category/Type	
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)	CREDIT CARD: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) B. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2014
Mailing Address 405 Howard St. #550		Amount of Each Disbursement this Period 63.00
City San Francisco	State CA	
Zip Code 94105-2999	Purpose of Disbursement Transportation	Transaction ID : 50125.E12262
Candidate Name	Category/Type	
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)	[MEMO ITEM] MEMO: TRANSPORTATION
State: District:		

Full Name (Last, First, Middle Initial) C. Casa Luca		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2014
Mailing Address 1109 New York Avenue NW		Amount of Each Disbursement this Period 3559.17
City Washington	State DC	
Zip Code 20001-	Purpose of Disbursement Appreciation Dinner	Transaction ID : 50125.E12263
Candidate Name	Category/Type	
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)	[MEMO ITEM] MEMO: APPRECIATION DINNER
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9231.11
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 53	
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Waldorf-Astoria		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 301 Park Ave.		Amount of Each Disbursement this Period 2213.70
City New York	State NY	
Zip Code 10022-	Purpose of Disbursement PA Soc. Conf.-lodging	Transaction ID : 50125.E12266
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: PA SOC. CONF.-LODGING
State: District:		

Full Name (Last, First, Middle Initial) B. Wolf Inaugural Committee		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2014
Mailing Address PO Box 22585		Amount of Each Disbursement this Period 200.00
City Philadelphia	State PA	
Zip Code 19110-	Purpose of Disbursement Tickets	Transaction ID : 50125.E12267
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: TICKETS
State: District:		

Full Name (Last, First, Middle Initial) c. Exxonmobil		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2015
Mailing Address 2305 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 36.55
City Washington	State DC	
Zip Code 20020-	Purpose of Disbursement Campaign car-monthly car	Transaction ID : 50125.E12268
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: CAMPAIGN CAR-MONTHLY CAR
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 21 OF 53			
	<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)
Doyle for Congress Committee

A. Homeless Childrens Education Fund

Full Name (Last, First, Middle Initial)
Mailing Address 2100 Smallman Street
2nd Floor

City Pittsburgh State PA Zip Code 15222-

Purpose of Disbursement Donation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 29 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : 50125.E12269

[MEMO ITEM]
MEMO: DONATION

B. Lidias

Full Name (Last, First, Middle Initial)
Mailing Address 1400 Smallman Street

City Pittsburgh State PA Zip Code 15222-

Purpose of Disbursement Appreciation Dinner

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 29 / 2014

Amount of Each Disbursement this Period: 1935.29

Transaction ID : 50125.E12270

[MEMO ITEM]
MEMO: APPRECIATION DINNER

C. New York Times

Full Name (Last, First, Middle Initial)
Mailing Address 620 8th Avenue

City New York State NY Zip Code 10018-

Purpose of Disbursement Subscription

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 04 / 2015

Amount of Each Disbursement this Period: 47.60

Transaction ID : 50125.E12272

[MEMO ITEM]
MEMO: SUBSCRIPTION

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 22 OF 53	
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 02 / 24 / 2015
Mailing Address P.O. Box 1270		Amount of Each Disbursement this Period 3022.87
City Newark	State NJ	
Zip Code 07101-1270	Purpose of Disbursement Credit card: See below	Transaction ID : 50406.E12316
Candidate Name	Category/Type	
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)	CREDIT CARD: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) B. Hilton Hotels		Date of Disbursement MM / DD / YYYY 01 / 21 / 2015
Mailing Address 2nd Street		Amount of Each Disbursement this Period 903.92
City Harrisburg	State PA	
Zip Code 17120-	Purpose of Disbursement Lodging/meals-Gov. Inaugural	Transaction ID : 50406.E12337
Candidate Name	Category/Type	
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)	[MEMO ITEM] MEMO: LODGING/MEALS-GOV. INAUGURAL
State: District:		

Full Name (Last, First, Middle Initial) c. Uber Technologies		Date of Disbursement MM / DD / YYYY 01 / 28 / 2015
Mailing Address 405 Howard St. #550		Amount of Each Disbursement this Period 109.00
City San Francisco	State CA	
Zip Code 94105-2999	Purpose of Disbursement Transportation	Transaction ID : 50406.E12340
Candidate Name	Category/Type	
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)	[MEMO ITEM] MEMO: TRANSPORTATION
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3022.87
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 23 OF 53			
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. New York Times		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2015
Mailing Address 620 8th Avenue		Amount of Each Disbursement this Period 50.00
City New York	State NY	
Zip Code 10018-	Purpose of Disbursement Subscription	Transaction ID : 50406.E12344
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: SUBSCRIPTION
State: District:		

Full Name (Last, First, Middle Initial) B. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2015
Mailing Address 101 Constitution Avenue, NW Suite 801 East		Amount of Each Disbursement this Period 49.01
City Washington	State DC	
Zip Code 20001-	Purpose of Disbursement Mail Service	Transaction ID : 50406.E12345
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: MAIL SERVICE
State: District:		

Full Name (Last, First, Middle Initial) c. Leadership Pittsburgh, Inc.		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015
Mailing Address 535 Smithfield St. Suite 1125		Amount of Each Disbursement this Period 350.00
City Pittsburgh	State PA	
Zip Code 15222-	Purpose of Disbursement Donation	Transaction ID : 50406.E12346
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: DONATION
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 24 OF 53			
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Exxonmobil		Date of Disbursement MM / DD / YYYY 02 / 28 / 2015
Mailing Address 2305 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 75.56
City Washington	State DC	
Zip Code 20020-		Transaction ID : 50406.E12347
Purpose of Disbursement Campaign car-monthly gas	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: CAMPAIGN CAR-MONTHLY GAS
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) B. Memorial Sloan Kettering Cancer Cen		Date of Disbursement MM / DD / YYYY 01 / 25 / 2015
Mailing Address 1275 York Avenue		Amount of Each Disbursement this Period 500.00
City New York	State NY	
Zip Code 10065-6007		Transaction ID : 50406.E12351
Purpose of Disbursement Donation	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: DONATION
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. American Express		Date of Disbursement MM / DD / YYYY 03 / 23 / 2015
Mailing Address P.O. Box 1270		Amount of Each Disbursement this Period 1961.16
City Newark	State NJ	
Zip Code 07101-1270		Transaction ID : 50406.E12387
Purpose of Disbursement Credit Card: See below	Category/Type	
Candidate Name		CREDIT CARD: SEE BELOW
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).....	1961.16
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 25 OF 53			
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2015
Mailing Address 30 Ivy St., SE		Amount of Each Disbursement this Period 130.00
City Washington State DC Zip Code 20003-4071	Purpose of Disbursement Delegation meeting	
Candidate Name	Category/Type	Transaction ID : 50406.E12395
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:		[MEMO ITEM] MEMO: DELEGATION MEETING

Full Name (Last, First, Middle Initial) B. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address 405 Howard St. #550		Amount of Each Disbursement this Period 106.00
City San Francisco State CA Zip Code 94105-2999	Purpose of Disbursement Transportation	
Candidate Name	Category/Type	Transaction ID : 50406.E12399
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:		[MEMO ITEM] MEMO: TRANSPORTATION

Full Name (Last, First, Middle Initial) C. Ristorante Tosca		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address 1112 F Street NW		Amount of Each Disbursement this Period 203.00
City Washington State DC Zip Code 20004-	Purpose of Disbursement Finance Meeting	
Candidate Name	Category/Type	Transaction ID : 50406.E12404
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:		[MEMO ITEM] MEMO: FINANCE MEETING

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 26 OF 53			
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. National Democratic Club		Date of Disbursement MM / DD / YYYY 02 / 27 / 2015
Mailing Address 30 Ivy St., SE		Amount of Each Disbursement this Period 114.39
City Washington	State DC	Zip Code 20003-4071
Purpose of Disbursement Delegation meeting	Category/Type	
Candidate Name	Transaction ID : 50406.E12409	
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:	[MEMO ITEM] MEMO: DELEGATION MEETING	

Full Name (Last, First, Middle Initial) B. New York Times		Date of Disbursement MM / DD / YYYY 03 / 01 / 2015
Mailing Address 620 8th Avenue		Amount of Each Disbursement this Period 50.00
City New York	State NY	Zip Code 10018-
Purpose of Disbursement Subscription	Category/Type	
Candidate Name	Transaction ID : 50406.E12410	
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:	[MEMO ITEM] MEMO: SUBSCRIPTION	

Full Name (Last, First, Middle Initial) c. National Democratic Club		Date of Disbursement MM / DD / YYYY 03 / 02 / 2015
Mailing Address 30 Ivy St., SE		Amount of Each Disbursement this Period 90.00
City Washington	State DC	Zip Code 20003-4071
Purpose of Disbursement Delegation meeting	Category/Type	
Candidate Name	Transaction ID : 50406.E12412	
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:	[MEMO ITEM] MEMO: DELEGATION MEETING	

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 27 OF 53			
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Limos.com		Date of Disbursement MM / DD / YYYY 03 / 06 / 2015
Mailing Address 2 Embarcadero Center Suite 1070		Amount of Each Disbursement this Period 135.72
City San Francisco	State CA	
Zip Code 94111-	Purpose of Disbursement Transportation	Transaction ID : 50406.E12416
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: TRANSPORTATION
State: District:		

Full Name (Last, First, Middle Initial) B. Exxonmobil		Date of Disbursement MM / DD / YYYY 03 / 31 / 2015
Mailing Address 2305 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 45.02
City Washington	State DC	
Zip Code 20020-	Purpose of Disbursement Campaign car-monthly gas	Transaction ID : 50406.E12417
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: CAMPAIGN CAR-MONTHLY GAS
State: District:		

Full Name (Last, First, Middle Initial) C. AT & T Mobility		Date of Disbursement MM / DD / YYYY 01 / 22 / 2015
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 171.85
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Phone charges	Transaction ID : 50125.E12246
Candidate Name	Category/ Type	
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)	PHONE CHARGES
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	171.85
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 28 OF 53	
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. AT & T Mobility		Date of Disbursement MM / DD / YYYY 02 / 21 / 2015
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 171.85
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Phone charges	Transaction ID : 50406.E12309
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)	PHONE CHARGES
State: District:		

Full Name (Last, First, Middle Initial) B. AT & T Mobility		Date of Disbursement MM / DD / YYYY 03 / 19 / 2015
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 172.07
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Phone charges	Transaction ID : 50406.E12372
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)	PHONE CHARGES
State: District:		

Full Name (Last, First, Middle Initial) C. Bloomfield Youth Athletic Assoc.		Date of Disbursement MM / DD / YYYY 03 / 23 / 2015
Mailing Address 227 Pearl Street		Amount of Each Disbursement this Period 250.00
City Pittsburgh	State PA	
Zip Code 15224-	Purpose of Disbursement Sponsor	Transaction ID : 50406.E12384
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)	SPONSOR
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	593.92
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 29 OF 53			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 20d	<input type="checkbox"/> 19c 21

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NAME OF COMMITTEE (In Full)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Autism Connection of PA			Date of Disbursement MM / DD / YYYY 02 / 07 / 2015
Mailing Address 35 Wilson Street, Suite 100			Amount of Each Disbursement this Period 300.00 Transaction ID : 50406.E12286
City Pittsburgh	State PA	Zip Code 15223-	
Purpose of Disbursement Tickets		Category/ Type	TICKETS
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) B. Veterans Breakfast Club			Date of Disbursement MM / DD / YYYY 02 / 07 / 2015
Mailing Address 200 Magnolia Place			Amount of Each Disbursement this Period 500.00 Transaction ID : 50406.E12289
City Pittsburgh	State PA	Zip Code 15228-	
Purpose of Disbursement Ad		Category/ Type	AD
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. Char-West COG			Date of Disbursement MM / DD / YYYY 01 / 24 / 2015
Mailing Address One Veterans Way Suite 202			Amount of Each Disbursement this Period 150.00 Transaction ID : 50125.E12249
City Carnegie	State PA	Zip Code 15106-	
Purpose of Disbursement Sponsor		Category/ Type	SPONSOR
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).....	950.00
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 30 OF 53			
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Char-West COG		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2015
Mailing Address One Veterans Way Suite 202		Amount of Each Disbursement this Period 443.00 Transaction ID : 50406.E12383
City Carnegie	State PA Zip Code 15106-	
Purpose of Disbursement Tee Sponsor	Category/Type	TEE SPONSOR
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) B. Char-West COG		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2015
Mailing Address One Veterans Way Suite 202		Amount of Each Disbursement this Period 70.00 Transaction ID : 50406.E12386
City Carnegie	State PA Zip Code 15106-	
Purpose of Disbursement Dinner tickets	Category/Type	DINNER TICKETS
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. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2015
Mailing Address 30 Ivy St., SE		Amount of Each Disbursement this Period 323.00 Transaction ID : 50406.E12312
City Washington	State DC Zip Code 20003-4071	
Purpose of Disbursement Delegation meeting	Category/Type	DELEGATION MEETING
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).....	443.00
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 31 OF 53			
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Allegheny County Democratic Committee			Date of Disbursement MM / DD / YYYY 02 / 22 / 2015
Mailing Address 429 Forbes Ave., Suite 1301			Amount of Each Disbursement this Period 950.00 Transaction ID : 50406.E12311
City Pittsburgh	State PA	Zip Code 15219-	
Purpose of Disbursement Tickets and Ad		Category/ Type	TICKETS AND AD
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) B. Borough of Dormont			Date of Disbursement MM / DD / YYYY 01 / 24 / 2015
Mailing Address 1444 Hillsdale Avenue Ste. #10			Amount of Each Disbursement this Period 315.00 Transaction ID : 50125.E12251
City Pittsburgh	State PA	Zip Code 15216-	
Purpose of Disbursement Ad		Category/ Type	AD
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. Michael Doyle			Date of Disbursement MM / DD / YYYY 03 / 15 / 2015
Mailing Address 205 Hawthorne Ct.			Amount of Each Disbursement this Period 236.76 Transaction ID : 50406.E12357
City Pittsburgh	State PA	Zip Code 15221-	
Purpose of Disbursement Reimbursement - Taxi Tolls Parkin		Category/ Type	REIMBURSEMENT - TAXI TOLLS PARKIN
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).....	1501.76
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 32 OF 53			
	<input checked="" type="checkbox"/> 17 <input 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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Michael Doyle		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2015
Mailing Address 205 Hawthorne Ct.		Amount of Each Disbursement this Period 56.33
City Pittsburgh	State PA	Zip Code 15221-
Purpose of Disbursement Reimbursement: See Below	Category/Type	
Candidate Name	Transaction ID : 50406.E12358	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	REIMBURSEMENT: SEE BELOW	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Susan B. Doyle		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 205 Hawthorne Court		Amount of Each Disbursement this Period 2231.93
City Pittsburgh	State PA	Zip Code 15221-
Purpose of Disbursement Salary	Category/Type	
Candidate Name	Transaction ID : 50125.E12260	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	SALARY	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Susan B. Doyle		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015
Mailing Address 205 Hawthorne Court		Amount of Each Disbursement this Period 2283.93
City Pittsburgh	State PA	Zip Code 15221-
Purpose of Disbursement Salary	Category/Type	
Candidate Name	Transaction ID : 50406.E12321	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	SALARY	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4572.19
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 33 OF 53	
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Susan B. Doyle		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 205 Hawthorne Court		Amount of Each Disbursement this Period 2083.93
City Pittsburgh	State PA	
Zip Code 15221-	Purpose of Disbursement Salary	Transaction ID : 50406.E12430
Candidate Name	Category/Type	
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)	SALARY
State: District:		

Full Name (Last, First, Middle Initial) B. EFTPS		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address P.O. Box 173788		Amount of Each Disbursement this Period 1131.90
City Denver	State CO	
Zip Code 80217-3788	Purpose of Disbursement Federal tax deposit	Transaction ID : 50118.E12199
Candidate Name	Category/Type	
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)	FEDERAL TAX DEPOSIT
State: District:		

Full Name (Last, First, Middle Initial) C. EFTPS		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2015
Mailing Address P.O. Box 173788		Amount of Each Disbursement this Period 1131.90
City Denver	State CO	
Zip Code 80217-3788	Purpose of Disbursement Federal tax deposit	Transaction ID : 50406.E12280
Candidate Name	Category/Type	
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)	FEDERAL TAX DEPOSIT
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4347.73
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 34 OF 53			
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. EFTPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address P.O. Box 173788		Amount of Each Disbursement this Period 1131.90
City Denver	State CO	
Zip Code 80217-3788	Purpose of Disbursement Federal tax deposit	Transaction ID : 50406.E12330
Candidate Name	Category/Type	
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)	FEDERAL TAX DEPOSIT
State: District:		

Full Name (Last, First, Middle Initial) B. Borough of Forest Hills		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2015
Mailing Address 2071 Ardmore Blvd.		Amount of Each Disbursement this Period 52.00
City Pittsburgh	State PA	
Zip Code 15221-	Purpose of Disbursement LST 2015	Transaction ID : 50406.E12282
Candidate Name	Category/Type	
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)	LST 2015
State: District:		

Full Name (Last, First, Middle Initial) c. Hepatica		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2015
Mailing Address 1119 South Braddock Avenue		Amount of Each Disbursement this Period 90.95
City Pittsburgh	State PA	
Zip Code 15218-	Purpose of Disbursement Funeral basket	Transaction ID : 50125.E12256
Candidate Name	Category/Type	
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)	FUNERAL BASKET
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1274.85
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 35 OF 53			
	<input checked="" type="checkbox"/> 17 <input 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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Hepatica		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2015
Mailing Address 1119 South Braddock Avenue		Amount of Each Disbursement this Period 118.77
City Pittsburgh	State PA	
Zip Code 15218-	Purpose of Disbursement Funeral Basket	FUNERAL BASKET
Candidate Name	Category/ Type	
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) B. Hepatica		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2015
Mailing Address 1119 South Braddock Avenue		Amount of Each Disbursement this Period 117.70
City Pittsburgh	State PA	
Zip Code 15218-	Purpose of Disbursement Funeral Basket	FUNERAL BASKET
Candidate Name	Category/ Type	
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. Hepatica		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 1119 South Braddock Avenue		Amount of Each Disbursement this Period 116.63
City Pittsburgh	State PA	
Zip Code 15218-	Purpose of Disbursement Funeral basket	FUNERAL BASKET
Candidate Name	Category/ Type	
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).....	353.10
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 36 OF 53			
	<input checked="" type="checkbox"/> 17 <input 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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Hepatica		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2015
Mailing Address 1119 South Braddock Avenue		Amount of Each Disbursement this Period 92.02
City Pittsburgh	State PA	Zip Code 15218-
Purpose of Disbursement Funeral Basket	Category/Type	
Candidate Name	Transaction ID : 50406.E12425	
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:	FUNERAL BASKET	

Full Name (Last, First, Middle Initial) B. Ireland Institute of Pittsburgh		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address Investment Building 239 Fourth Avenue		Amount of Each Disbursement this Period 500.00
City Pittsburgh	State PA	Zip Code 15222-
Purpose of Disbursement Sponsor	Category/Type	
Candidate Name	Transaction ID : 50406.E12354	
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:	SPONSOR	

Full Name (Last, First, Middle Initial) C. Jewish Chronicle		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2015
Mailing Address 5915 Beacon St., FL 3		Amount of Each Disbursement this Period 265.00
City Pittsburgh	State PA	Zip Code 15217-2005
Purpose of Disbursement Ad	Category/Type	
Candidate Name	Transaction ID : 50406.E12362	
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:	AD	

SUBTOTAL of Disbursements This Page (optional).....	857.02
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 37 OF 53			
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Kieloch Consulting, Inc.			Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address 228 Second St. SE			Amount of Each Disbursement this Period 3500.00
City Washington	State DC	Zip Code 20003-	
Purpose of Disbursement Campaign Consulting		Category/ Type	Transaction ID : 50118.E12230
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)		CAMPAIGN CONSULTING
State: District:			

Full Name (Last, First, Middle Initial) B. Kieloch Consulting, Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2015
Mailing Address 228 Second St. SE			Amount of Each Disbursement this Period 3500.00
City Washington	State DC	Zip Code 20003-	
Purpose of Disbursement Campaign Consulting		Category/ Type	Transaction ID : 50406.E12285
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)		CAMPAIGN CONSULTING
State: District:			

Full Name (Last, First, Middle Initial) C. Kieloch Consulting, Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015
Mailing Address 228 Second St. SE			Amount of Each Disbursement this Period 3500.00
City Washington	State DC	Zip Code 20003-	
Purpose of Disbursement Campaign Consulting		Category/ Type	Transaction ID : 50406.E12318
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)		CAMPAIGN CONSULTING
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	10500.00
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 38 OF 53			
	<input checked="" type="checkbox"/> 17 <input 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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Allegheny County Labor Council			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015
Mailing Address 401 Wood St. Suite 501			Amount of Each Disbursement this Period 600.00
City Pittsburgh	State PA	Zip Code 15222-	Transaction ID : 50406.E12328
Purpose of Disbursement Ad & Tickets	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		AD & TICKETS
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Lawrenceville Fireworks Committee			Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address c/o Lawrenceville United 4839 Butler Street			Amount of Each Disbursement this Period 250.00
City Pittsburgh	State PA	Zip Code 15201-	Transaction ID : 50118.E12238
Purpose of Disbursement Sponsor	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		SPONSOR
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. LBAA			Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2015
Mailing Address PO Box 54			Amount of Each Disbursement this Period 250.00
City Glassport	State PA	Zip Code 15045-	Transaction ID : 50406.E12290
Purpose of Disbursement Team Sponsor	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		TEAM SPONSOR
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	1100.00
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 39 OF 53	
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. AT & T Mobility		Date of Disbursement MM / DD / YYYY 02 / 11 / 2015
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 42.30
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Equipment	Transaction ID : 50406.E12391
Candidate Name	Category/Type	
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)	[MEMO ITEM] MEMO: EQUIPMENT
State: District:		

Full Name (Last, First, Middle Initial) B. PA Department of Revenue		Date of Disbursement MM / DD / YYYY 02 / 04 / 2015
Mailing Address P.O. Box 280401		Amount of Each Disbursement this Period 101.31
City Harrisburg	State PA	
Zip Code 17128-0401	Purpose of Disbursement State Withholding tax	Transaction ID : 50406.E12281
Candidate Name	Category/Type	
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 WITHHOLDING TAX
State: District:		

Full Name (Last, First, Middle Initial) C. PA Department of Revenue		Date of Disbursement MM / DD / YYYY 03 / 03 / 2015
Mailing Address P.O. Box 280401		Amount of Each Disbursement this Period 101.31
City Harrisburg	State PA	
Zip Code 17128-0401	Purpose of Disbursement State Withholding tax	Transaction ID : 50406.E12329
Candidate Name	Category/Type	
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 WITHHOLDING TAX
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	202.62
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 53			
	<input checked="" type="checkbox"/> 17 <input 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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. St. Patricks Day Parade Committee			Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2015
Mailing Address c/o Camella Mullen 426 Second St.			Amount of Each Disbursement this Period 200.00
City Braddock	State PA	Zip Code 15104-	Transaction ID : 50406.E12284
Purpose of Disbursement Parade fee		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PARADE FEE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. St. Patricks Day Parade Committee			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2015
Mailing Address c/o Camella Mullen 426 Second St.			Amount of Each Disbursement this Period 120.00
City Braddock	State PA	Zip Code 15104-	Transaction ID : 50406.E12356
Purpose of Disbursement Button Party		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	BUTTON PARTY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. PHGSA			Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2015
Mailing Address PO Box 27010			Amount of Each Disbursement this Period 250.00
City Pittsburgh	State PA	Zip Code 15235-	Transaction ID : 50406.E12423
Purpose of Disbursement Sponsor		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SPONSOR
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....	570.00
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 41 OF 53			
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. PIIN		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2015
Mailing Address Manor Building, Suite 808 564 Forbes Avenue		Amount of Each Disbursement this Period 200.00 Transaction ID : 50406.E12422
City Pittsburgh	State PA Zip Code 15219-	
Purpose of Disbursement Ad	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	AD	

Full Name (Last, First, Middle Initial) B. Poise Foundation		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2015
Mailing Address 2228 Wylie Avenue Attn: Gwendolyn P. Ware		Amount of Each Disbursement this Period 250.00 Transaction ID : 50406.E12360
City Pittsburgh	State PA Zip Code 15219-	
Purpose of Disbursement Sponsor	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	SPONSOR	

Full Name (Last, First, Middle Initial) c. Sharing & Caring Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015
Mailing Address P.O. Box 2616		Amount of Each Disbursement this Period 250.00 Transaction ID : 50406.E12325
City Pittsburgh	State PA Zip Code 15230-2616	
Purpose of Disbursement Sponsor	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	SPONSOR	

SUBTOTAL of Disbursements This Page (optional).....	700.00
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 42 OF 53	
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Soldiers & Sailors Military Museum		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address 4141 Fifth Avenue		Amount of Each Disbursement this Period 240.00
City Pittsburgh	State PA	
Zip Code 15213-	Purpose of Disbursement Ad & tickets	Transaction ID : 50118.E12229
Candidate Name	Category/Type	
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)	AD & TICKETS
State: District:		

Full Name (Last, First, Middle Initial) B. St. Bernadette Parish Festival		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2015
Mailing Address 245 Azalea Drive		Amount of Each Disbursement this Period 350.00
City Monroeville	State PA	
Zip Code 15146-	Purpose of Disbursement Sponsor	Transaction ID : 50406.E12306
Candidate Name	Category/Type	
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)	SPONSOR
State: District:		

Full Name (Last, First, Middle Initial) c. The LJS Group		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address P.O. Box 143		Amount of Each Disbursement this Period 100.00
City Monroeville	State PA	
Zip Code 15146-0143	Purpose of Disbursement Sponsor	Transaction ID : 50118.E12236
Candidate Name	Category/Type	
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)	SPONSOR
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	690.00
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 43 OF 53			
	<input checked="" type="checkbox"/> 17 <input 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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. The LJS Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2015
Mailing Address P.O. Box 143		Amount of Each Disbursement this Period 100.00
City Monroeville	State PA	
Zip Code 15146-0143	Purpose of Disbursement Sponsor	Transaction ID : 50406.E12378
Candidate Name	Category/ Type	
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)	SPONSOR
State: District:		

Full Name (Last, First, Middle Initial) B. Twenty First Century Group		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2015
Mailing Address 434 New Jersey Avenue, SE		Amount of Each Disbursement this Period 2100.00
City Washington	State DC	
Zip Code 20003-	Purpose of Disbursement Fundraiser-food/bev.	Transaction ID : 50406.E12298
Candidate Name	Category/ Type	
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)	FUNDRAISER-FOOD/BEV.
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2015
Mailing Address PO BOX 15124		Amount of Each Disbursement this Period 112.67
City Albany	State NY	
Zip Code 12212-5124	Purpose of Disbursement Phone charges	Transaction ID : 50118.E12237
Candidate Name	Category/ Type	
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)	PHONE CHARGES
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2312.67
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 53			
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address PO BOX 15124		Amount of Each Disbursement this Period 60.00
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Modem charge	Candidate Name	Transaction ID : 50118.E12241
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:	MODEM CHARGE

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2015
Mailing Address PO BOX 15124		Amount of Each Disbursement this Period 114.11
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Phone charges	Candidate Name	Transaction ID : 50406.E12279
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:	PHONE CHARGES

Full Name (Last, First, Middle Initial) c. Verizon		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address PO BOX 15124		Amount of Each Disbursement this Period 60.00
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Modem charge	Candidate Name	Transaction ID : 50406.E12314
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:	MODEM CHARGE

SUBTOTAL of Disbursements This Page (optional).....	234.11
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 53	
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address PO BOX 15124		Amount of Each Disbursement this Period 113.98
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Phone Charges	Category/Type	Transaction ID : 50406.E12353
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)	PHONE CHARGES
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2015
Mailing Address PO BOX 15124		Amount of Each Disbursement this Period 60.00
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Modem charge	Category/Type	Transaction ID : 50406.E12355
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)	MODEM CHARGE
State: District:		

Full Name (Last, First, Middle Initial) c. Verizon		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2015
Mailing Address PO BOX 15124		Amount of Each Disbursement this Period 113.98
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Phone charges	Category/Type	Transaction ID : 50406.E12426
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)	PHONE CHARGES
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	287.98
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 53	
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Ralph Watson		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2015
Mailing Address 1218 Hill Avenue		Amount of Each Disbursement this Period 250.00 Transaction ID : 50125.E12261
City Pittsburgh	State PA Zip Code 15221-	
Purpose of Disbursement AD	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	AD	

Full Name (Last, First, Middle Initial) B. WMBL		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2015
Mailing Address PO Box 13		Amount of Each Disbursement this Period 200.00 Transaction ID : 50125.E12252
City West Mifflin	State PA Zip Code 15122-	
Purpose of Disbursement Team Sponsor	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	TEAM SPONSOR	

Full Name (Last, First, Middle Initial) c. Zeo Technologies		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015
Mailing Address P.O. Box 214		Amount of Each Disbursement this Period 345.00 Transaction ID : 50125.E12245
City Meadow Lands	State PA Zip Code 15347-	
Purpose of Disbursement Web Maintenance & Domain renewal	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	WEB MAINTENANCE & DOMAIN RENEWAL	

SUBTOTAL of Disbursements This Page (optional).....	795.00
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 47 OF 53			
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Zeo Technologies		Date of Disbursement MM / DD / YYYY 02 / 09 / 2015
Mailing Address P.O. Box 214		Amount of Each Disbursement this Period 275.00
City Meadow Lands	State PA	
Zip Code 15347-	Purpose of Disbursement Web Maintenance	Transaction ID : 50406.E12295
Candidate Name	Category/Type	
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)	WEB MAINTENANCE
State: District:		

Full Name (Last, First, Middle Initial) B. Zeo Technologies		Date of Disbursement MM / DD / YYYY 03 / 19 / 2015
Mailing Address P.O. Box 214		Amount of Each Disbursement this Period 275.00
City Meadow Lands	State PA	
Zip Code 15347-	Purpose of Disbursement Web Maintenance	Transaction ID : 50406.E12373
Candidate Name	Category/Type	
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)	WEB MAINTENANCE
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	Purpose of Disbursement	
Candidate Name	Category/Type	
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).....	550.00
TOTAL This Period (last page this line number only).....	47222.92

**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 53	
	<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)
Doyle for Congress Committee

A. Young Democrats of Allegheny County

Full Name (Last, First, Middle Initial)
Mailing Address c/o Allegheny County Democratic Co
429 Forbes Avenue, Suite 1301

City Pittsburgh State PA Zip Code 15222-

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 17 / 2015

Amount of Each Disbursement this Period
1000.00

Transaction ID : 50118.E12242

B. University of Pgh. College Democrats

Full Name (Last, First, Middle Initial)
Mailing Address 3990 Fifth Avenue
Brackenridge 302-1

City Pittsburgh State PA Zip Code 15213-

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 23 / 2015

Amount of Each Disbursement this Period
1000.00

Transaction ID : 50406.E12385

c. Northsiders for Dan Styche

Full Name (Last, First, Middle Initial)
Mailing Address 1229 W. North Avenue

City Pittsburgh State PA Zip Code 15233-

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 01 / 2015

Amount of Each Disbursement this Period
500.00

Transaction ID : 50406.E12322

SUBTOTAL of Disbursements This Page (optional)..... 2500.00

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 53	
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Friends of Anthony DeLuca, Jr.		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015
Mailing Address 140 McAlister Drive		Amount of Each Disbursement this Period 500.00 Transaction ID : 50406.E12326
City Pittsburgh	State PA Zip Code 15235-	
Purpose of Disbursement CONTRIBUTION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. 7th Ward Democratic Committee		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015
Mailing Address c/o Jeanne Clark 414 Stratton Lane		Amount of Each Disbursement this Period 500.00 Transaction ID : 50406.E12324
City Pittsburgh	State PA Zip Code 15206-	
Purpose of Disbursement CONTRIBUTION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Churchill Democratic Committee		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015
Mailing Address c/o Bonnie Pantlik 884 Graham Blvd.		Amount of Each Disbursement this Period 500.00 Transaction ID : 50406.E12323
City Pittsburgh	State PA Zip Code 15221-	
Purpose of Disbursement CONTRIBUTION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1500.00
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 53	
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. City of Pittsburgh Democratic Committee		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015
Mailing Address P.O. Box 71413		Amount of Each Disbursement this Period 1000.00 Transaction ID : 50406.E12315
City Pittsburgh	State PA	
Zip Code 15213-	Purpose of Disbursement CONTRIBUTION	Category/ Type
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. Penn Hills Democratic Committee		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2015
Mailing Address c/o Phil Scolieri 1419 Barbara Drive		Amount of Each Disbursement this Period 200.00 Transaction ID : 50406.E12380
City Verona	State PA	
Zip Code 15147-	Purpose of Disbursement CONTRIBUTION	Category/ Type
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. Friends of Ed Gainey		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address P.O. Box 5208		Amount of Each Disbursement this Period 1000.00 Transaction ID : 50118.E12196
City Pittsburgh	State PA	
Zip Code 15206-	Purpose of Disbursement CONTRIBUTION	Category/ Type
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).....	2200.00
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 53	
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Pittsburgh Green Innovators		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2015
Mailing Address P.O. Box 2072		Amount of Each Disbursement this Period 250.00 Transaction ID : 50406.E12277
City Pittsburgh	State PA	
Zip Code 15230-	Purpose of Disbursement DONATION	Category/ Type
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. Keep Judge Motznik		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2015
Mailing Address PO Box 96041		Amount of Each Disbursement this Period 250.00 Transaction ID : 50406.E12303
City Pittsburgh	State PA	
Zip Code 15226-	Purpose of Disbursement CONTRIBUTION	Category/ Type
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. Committee for Kopas		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2015
Mailing Address 341 Willow Crossing Rd.		Amount of Each Disbursement this Period 500.00 Transaction ID : 50125.E12254
City Greensburg	State PA	
Zip Code 15601-	Purpose of Disbursement CONTRIBUTION	Category/ Type
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).....	1000.00
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 52 OF 53
	<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)
Doyle for Congress Committee

A. LEOM K-9 Memorial

Full Name (Last, First, Middle Initial)
Mailing Address c/o Greater Pittsburgh Police FCU
1338 Chartiers Avenue

City Pittsburgh State PA Zip Code 15220-

Purpose of Disbursement DONATION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 05 / 2015

Amount of Each Disbursement this Period
500.00

Transaction ID : 50118.E12227

B. Debbie Liptak

Full Name (Last, First, Middle Initial)
Mailing Address c/o Rankin Police Dept.
320 Hawkins Avenue

City Rankin State PA Zip Code 15104-

Purpose of Disbursement DONATION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 24 / 2015

Amount of Each Disbursement this Period
500.00

Transaction ID : 50125.E12247

C. People for Palmiere

Full Name (Last, First, Middle Initial)
Mailing Address 422 Dewalt Drive

City Pittsburgh State PA Zip Code 15234-

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
01 / 24 / 2015

Amount of Each Disbursement this Period
1000.00

Transaction ID : 50125.E12253

SUBTOTAL of Disbursements This Page (optional)..... 2000.00

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 53	
	<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)
Doyle for Congress Committee

Full Name (Last, First, Middle Initial) A. Squirrel Hill Urban Coalition		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015
Mailing Address 5604 Solway Street		Amount of Each Disbursement this Period 1000.00 Transaction ID : 50406.E12319
City Pittsburgh	State PA	
Zip Code 15217-	Purpose of Disbursement DONATION	Category/ Type
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. Ladies Auxiliary VFW Post 803		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2015
Mailing Address 911 North State Street		Amount of Each Disbursement this Period 500.00 Transaction ID : 50406.E12427
City Clairton	State PA	
Zip Code 15025-	Purpose of Disbursement DONATION	Category/ Type
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. 10th Ward Veterans Memorial		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015
Mailing Address c/o Dale A. Robinson, Treasurer 625 Atlantic Avenue		Amount of Each Disbursement this Period 250.00 Transaction ID : 50406.E12327
City Mc Keesport	State PA	
Zip Code 15132-	Purpose of Disbursement DONATION	Category/ Type
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).....	1750.00
TOTAL This Period (last page this line number only).....	10950.00