

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

NICK TROIANO FOR CONGRESS

ADDRESS (number and street)

845 Diamond Street

Check if different than previously reported. (ACC)

Williamsport

PA

17701

2. **FEC IDENTIFICATION NUMBER** ▼

C C00561464

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

PA

10

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on 11 / 04 / 2014 in the State of PA

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

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

Election on / / in the State of

5. Covering Period

10 / 01 / 2014 through 10 / 15 / 2014

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 Joe Besterling

Signature of Treasurer Joe Besterling

[Electronically Filed]

Date

10 / 23 / 2014

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									
-----------------	--	--	--	--	--	--	--	--	--

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

NICK TROIANO FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	9006.00	150582.42
(b) Total Contribution Refunds (from Line 20(d))	5.00	5.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	9001.00	150577.42
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	19053.73	129184.33
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	852.19
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	19053.73	128332.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	22245.28	
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

NICK TROIANO FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7831.00	108365.51
(ii) Unitemized.....	1175.00	39281.84
(iii) TOTAL of contributions from individuals ▶	9006.00	147647.35
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	2935.07
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	9006.00	150582.42
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	852.19
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	9006.00	151434.61

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	19053.73	129184.33
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	5.00	5.00
(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)).....	5.00	5.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	19058.73	129189.33

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	32298.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	9006.00
25. SUBTOTAL (add Line 23 and Line 24).....	41304.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	19058.73
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	22245.28

**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 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
NICK TROIANO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. David Burstein		Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2014	
Mailing Address 455 East 14th Street Apt 6C		Transaction ID : SA11AI.5830	
City State Zip Code New York NY 10009	Amount of Each Receipt this Period 900.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Run for America CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1125.00		

Full Name (Last, First, Middle Initial) B. Kenneth Cerullo		Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014	
Mailing Address 9 Doremus Rd.		Transaction ID : SA11AI.5888	
City State Zip Code Mahwah NJ 07430	Amount of Each Receipt this Period 50.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation The Commercial Agency, Inc. Insurance Agency Owner and Lawyer		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) C. Katharine Dodge		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014	
Mailing Address 1632 Lake Ariel Hwy		Transaction ID : SA11AI.5835	
City State Zip Code Lake Ariel PA 18436	Amount of Each Receipt this Period 250.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Unemployed Unemployed		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	[]

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

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

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

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)
NICK TROIANO FOR CONGRESS

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

Mailing Address 400 W. 12th St.

City State Zip Code
New York NY 10014

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

Name of Employer Occupation
Rain CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3151.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.5836

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

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

Mailing Address 136 Village Dr

City State Zip Code
Mifflintown PA 17059

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 03 / 2014

Transaction ID : SA11AI.5840

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 484 1st Street

City State Zip Code
Brooklyn NY 11215

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

Name of Employer Occupation
Pachamama Alliance Facilitator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 03 / 2014

Transaction ID : SA11AI.5849

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

3350.00

**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 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
NICK TROIANO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Floyd Isbell

Mailing Address 788 Flater Hill Rd

City State Zip Code
Ulster PA 18850

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

Name of Employer Occupation
Self Tractor Manufacturer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
206.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 01 / 2014

Transaction ID : SA11AI.5856

Amount of Each Receipt this Period
206.00
CONTRIBUTION

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

Mailing Address 2159 Valley View Rd

City State Zip Code
Montrose PA 18801

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

Name of Employer Occupation
Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2014

Transaction ID : SA11AI.5858

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address 267 Sawmill Rd.

City State Zip Code
Cogan Station PA 17728

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

Name of Employer Occupation
Lezzer Holdings Inc. Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3200.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11AI.5863

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

1456.00

**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 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
NICK TROIANO FOR CONGRESS

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

Mailing Address 2 Fox Hollow Court

City State Zip Code
Flemington NJ 08822

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

Name of Employer Occupation
Lambertville-New Hope Amb. EMT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.5891

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

Mailing Address 1615 Q St. NW
Apt. 602

City State Zip Code
Washington DC 20009

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

Name of Employer Occupation
Veracity Media Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 01 / 2014

Transaction ID : SA11AI.5821

Amount of Each Receipt this Period
500.00

In-kind - Commercial

C. Full Name (Last, First, Middle Initial)
Matthew O'Grady

Mailing Address 55 9th St
Apt 1409

City State Zip Code
San Francisco CA 94103

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

Name of Employer Occupation
HouseCanary Data Scientist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 03 / 2014

Transaction ID : SA11AI.5875

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

1000.00

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

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

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)
NICK TROIANO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Donna Renella

Mailing Address 401 Half Moon Bay Drive

City State Zip Code
Croton-on-Hudson NY 10520

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

Name of Employer Occupation
ABW Solutions Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2014

Transaction ID : SA11AI.5878

Amount of Each Receipt this Period
25.00

CONTRIBUTION

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

Mailing Address 4060 Circle Ct

City State Zip Code
Milford PA 18337

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2014

Transaction ID : SA11AI.5882

Amount of Each Receipt this Period
150.00

CONTRIBUTION

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

Mailing Address 1201 Sunshine Ave

City State Zip Code
Cody WY 82414

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 07 / 2014

Transaction ID : SA11AI.5883

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

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

275.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
NICK TROIANO FOR CONGRESS

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

Mailing Address **PO Box 927**

City **Milford** State **PA** Zip Code **18337**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.5823

Amount of Each Receipt this Period
300.00
 In-kind - Office Rent Discount

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

Mailing Address **613 5th Street**

City **Milford** State **PA** Zip Code **18337**

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

Name of Employer **Self-Employed** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11AI.5886

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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).....

550.00

7831.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 23		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
NICK TROIANO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. 4imprint		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 101 Commerce Street		Amount of Each Disbursement this Period 218.88
City Oshkosh	State WI Zip Code 54901	
Purpose of Disbursement Campaign Buttons	Category/Type	Transaction ID : SB17.5893
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. Adams Outdoor Advertising		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 500 Colonial Center Pkwy		Amount of Each Disbursement this Period 1518.00
City Roswell	State GA Zip Code 30076	
Purpose of Disbursement Billboard	Category/Type	Transaction ID : SB17.5895
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. Amazon.com		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 1516 2nd Ave.		Amount of Each Disbursement this Period 84.54
City Seattle	State WA Zip Code 98101	
Purpose of Disbursement Costumes	Category/Type	Transaction ID : SB17.5897
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).....	1821.42
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 12 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
NICK TROIANO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Amazon.com		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 1516 2nd Ave.		Amount of Each Disbursement this Period 161.70
City Seattle	State WA	
Zip Code 98101	Purpose of Disbursement Foam Boards	Transaction ID : SB17.5898
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. Danielle Bowes		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 845 Diamond St.		Amount of Each Disbursement this Period 800.00
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Finance Consulting	Transaction ID : SB17.5983
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. Danielle Bowes		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 845 Diamond St.		Amount of Each Disbursement this Period 9.99
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Expense Reimbursement	Transaction ID : SB17.5984
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).....	971.69
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 13 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
NICK TROIANO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Campaign Communications Solutions, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 13 Briarwood Road		Amount of Each Disbursement this Period 3200.00
City Long Valley	State NJ Zip Code 07853	
Purpose of Disbursement Tele-Townhall Service	Candidate Name	Transaction ID : SB17.5902
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Comcast		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address One Comcast Center		Amount of Each Disbursement this Period 115.61
City Philadelphia	State PA Zip Code 19103	
Purpose of Disbursement Internet & Cable	Candidate Name	Transaction ID : SB17.5909
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Democracy Engine LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 850 Quincy St. NW #402		Amount of Each Disbursement this Period 151.70
City Washington	State DC Zip Code 20009	
Purpose of Disbursement Credit Card Processing Fee	Candidate Name	Transaction ID : SB17.5911
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	3467.31
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 23			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
NICK TROIANO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Democracy Engine LLC			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014		
Mailing Address 850 Quincy St. NW #402			Amount of Each Disbursement this Period 59.46		
City Washington	State DC	Zip Code 20009	Transaction ID : SB17.5912		
Purpose of Disbursement Credit Card Processing Fee		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Democracy Engine LLC			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014		
Mailing Address 850 Quincy St. NW #402			Amount of Each Disbursement this Period 30.29		
City Washington	State DC	Zip Code 20009	Transaction ID : SB17.5913		
Purpose of Disbursement Credit Card Processing Fee		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Facebook, Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014		
Mailing Address 156 University Ave.			Amount of Each Disbursement this Period 66.73		
City Palo Alto	State CA	Zip Code 94301	Transaction ID : SB17.5917		
Purpose of Disbursement Ads		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	156.48
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 15 OF 23			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
NICK TROIANO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gaglers, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 2050 Nunes Dr.		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.5919
City San Jose	State CA	
Zip Code 95131	Purpose of Disbursement Phone Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Gaglers, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 2050 Nunes Dr.		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.5920
City San Jose	State CA	
Zip Code 95131	Purpose of Disbursement Phone Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Gaglers, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 2050 Nunes Dr.		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.5921
City San Jose	State CA	
Zip Code 95131	Purpose of Disbursement Phone Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	325.00
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 16 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
NICK TROIANO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 83.65
City Mountain View	State CA Zip Code 94043	
Purpose of Disbursement Website	Candidate Name	Transaction ID : SB17.5925
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Keystone Advertising Specialties		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 1625 John Brady Dr		Amount of Each Disbursement this Period 1718.26
City Muncy	State PA Zip Code 17756	
Purpose of Disbursement Yard Signs	Candidate Name	Transaction ID : SB17.5929
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Labels & Lists, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 2500 116th Ave. NE		Amount of Each Disbursement this Period 407.63
City Bellevue	State WA Zip Code 98004	
Purpose of Disbursement Voter Data	Candidate Name	Transaction ID : SB17.5933
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	2209.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
NICK TROIANO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Labels & Lists, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 2500 116th Ave. NE		Amount of Each Disbursement this Period 99.45
City Bellevue	State WA	
Zip Code 98004	Purpose of Disbursement Voter Data	Transaction ID : SB17.5934
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. Lamar Advertising		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 220 US 15		Amount of Each Disbursement this Period 1015.00
City Williamsport	State PA	
Zip Code 17702	Purpose of Disbursement Billboard	Transaction ID : SB17.5936
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. Ryan Morgan		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 1615 Q St. NW Apt. 602		Amount of Each Disbursement this Period 500.00
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement In-kind - Commercial	Transaction ID : SB17.5822
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1614.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 23			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
NICK TROIANO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Newberry Minimart		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 2300 West 4th Street		Amount of Each Disbursement this Period 38.29
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) B. Matt Ruth		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 845 Diamond St.		Amount of Each Disbursement this Period 800.00
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Campaign Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) C. Matt Ruth		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 845 Diamond St.		Amount of Each Disbursement this Period 9.99
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Expense Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	848.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
NICK TROIANO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Matt Ruth		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 845 Diamond St.		Amount of Each Disbursement this Period 4.80
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Travel Reimbursement	Transaction ID : SB17.5996
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. SF Media Consultants Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 4548 Biltmore Drive		Amount of Each Disbursement this Period 2423.00
City Frisco	State TX	
Zip Code 75034	Purpose of Disbursement Media Ad Buy	Transaction ID : SB17.5957
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. Richard Snyder		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address PO Box 927		Amount of Each Disbursement this Period 300.00
City Milford	State PA	
Zip Code 18337	Purpose of Disbursement In-kind - Office Rent Discount	Transaction ID : SB17.5824
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2727.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 23			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
NICK TROIANO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Staples, Williamsport			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014		
Mailing Address 1915 E. 3rd St.			Amount of Each Disbursement this Period 640.05		
City Williamsport	State PA	Zip Code 17701	Transaction ID : SB17.5961		
Purpose of Disbursement Poll & Editorial Board Materials		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Staples, Williamsport			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014		
Mailing Address 1915 E. 3rd St.			Amount of Each Disbursement this Period 21.15		
City Williamsport	State PA	Zip Code 17701	Transaction ID : SB17.5962		
Purpose of Disbursement Office Supplies		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Staples, Williamsport			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014		
Mailing Address 1915 E. 3rd St.			Amount of Each Disbursement this Period 62.53		
City Williamsport	State PA	Zip Code 17701	Transaction ID : SB17.5963		
Purpose of Disbursement Office Supplies		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	723.73
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 21 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
NICK TROIANO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TrendPo		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 320 19th Street NW M1		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.5971
City Washington State DC Zip Code 20036	Purpose of Disbursement Social Media Advertising	
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. Nicholas Robert Troiano		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 845 Diamond Street		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.5986
City Williamsport State PA Zip Code 17701	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input checked="" 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: PA District: 10		

Full Name (Last, First, Middle Initial) c. Rachel Vierling		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 845 Diamond St.		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.5990
City Williamsport State PA Zip Code 17701	Purpose of Disbursement Communications Consulting	
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).....	2600.00
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 23		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

NAME OF COMMITTEE (In Full)
NICK TROIANO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rachel Vierling		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 845 Diamond St.		Amount of Each Disbursement this Period 9.99 Transaction ID : SB17.5991
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Expense Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Rachel Vierling		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 845 Diamond St.		Amount of Each Disbursement this Period 8.40 Transaction ID : SB17.5994
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Fuel Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Walmart		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 1015 N. Loyalsock Ave.		Amount of Each Disbursement this Period 3.14 Transaction ID : SB17.5982
City Montoursville	State PA	
Zip Code 17754	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	21.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 23		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

NAME OF COMMITTEE (In Full)
NICK TROIANO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Blake Wright		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 845 Diamond St.		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.5989
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Campaign Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Blake Wright		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 845 Diamond St.		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.5995
City Williamsport	State PA	
Zip Code 17701	Purpose of Disbursement Travel Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

SUBTOTAL of Disbursements This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	18387.23