

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Citizens for Boyle

ADDRESS (number and street)

PO Box 11545

Check if different than previously reported. (ACC)

Philadelphia

PA

19116

2. FEC IDENTIFICATION NUMBER ▼

C C00543363

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

PA

13

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

Termination Report (TER)

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

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

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Janica Kyriacopoulos

Signature of Treasurer Janica Kyriacopoulos

[Electronically Filed]

Date

/ /

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
Citizens for Boyle

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	116585.19	811595.59
(b) Total Contribution Refunds (from Line 20(d))	100.00	4100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	116485.19	807495.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	214769.05	724634.54
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	65.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	214769.05	724569.54
8. Cash on Hand at Close of Reporting Period (from Line 27).....	152697.58	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	153273.12	

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

Citizens for Boyle

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	37201.92	389824.06
(ii) Unitemized.....	3080.11	65277.80
(iii) TOTAL of contributions from individuals ▶	40282.03	449901.86
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	75250.00	300300.00
(d) The Candidate.....	1053.16	61393.73
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	116585.19	811595.59
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	70000.00	70000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	70000.00	70000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	65.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	21.53
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	186585.19	881682.12

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	214769.05	724634.54
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	100.00	100.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	100.00	4100.00
21. OTHER DISBURSEMENTS	0.00	250.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	214869.05	728984.54

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	180981.44
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	186585.19
25. SUBTOTAL (add Line 23 and Line 24).....	367566.63
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	214869.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	152697.58

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A
Transaction ID :

Report is amended to update the debt owed to Adam Erickson, and corrects the debt schedule for O'Brien Printing to note the debt of \$942.34 was paid during the period. Amendment also deletes contribution from donor Britton Clarke to correctly disclose the contribution as being from his employer, Nelson Mullins PAC.

Form/Schedule:
Transaction ID:

**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 79
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Det Ansinn

Mailing Address 432 Belmont Ave

City State Zip Code
Doylestown PA 18901-4428

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

Name of Employer Occupation
BrickSimple LLC Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 09 / 2014

Transaction ID : C10019461

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Michael F. Barrett Esq.

Mailing Address 1615 Monk Rd

City State Zip Code
Gladwyne PA 19035-1349

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

Name of Employer Occupation
Saltz Mongeluzzi Barrett & Bendesky, P Shareholder

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
06 / 16 / 2014

Transaction ID : C10086543

Amount of Each Receipt this Period
500.00

2014 Primary Debt Retirement

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

Mailing Address 828 Red Lion Rd, Ste E1

City State Zip Code
Philadelphia PA 19115

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

Name of Employer Occupation
Inter County Development Corp. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 07 / 2014

Transaction ID : C10017160

Amount of Each Receipt this Period
600.00

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

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

1300.00

**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 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Jack Bienenfeld

Mailing Address 828 Red Lion Rd, Ste E1

City Philadelphia State PA Zip Code 19115

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

Name of Employer Inter County Development Corp. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 07 / 2014

Transaction ID : C10017161

Amount of Each Receipt this Period
900.00

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

Mailing Address 925 W Market St

City Bethlehem State PA Zip Code 18018-5016

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

Name of Employer Self Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : C10025661

Amount of Each Receipt this Period
250.00

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

Mailing Address 1336 Colton Rd

City Gladwyne State PA Zip Code 19035-1138

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

Name of Employer Anapol Schwartz Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2014

Transaction ID : C10057932

Amount of Each Receipt this Period
500.00

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

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

1650.00

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

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

FOR LINE NUMBER: PAGE 8 OF 79
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Lawrence R. Cohan

Mailing Address 1336 Colton Rd

City Gladwyne State PA Zip Code 19035-1138

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

Name of Employer Anapol schwartz Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2014

Transaction ID : C10126571

Amount of Each Receipt this Period
 _____ 500.00

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

Mailing Address 580 Wigard Ave

City Philadelphia State PA Zip Code 19128-3132

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

Name of Employer NorthMarq Advisors Occupation Vice Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : C10016373

Amount of Each Receipt this Period
 _____ 500.00

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

Mailing Address 13037 Lindsay St

City Philadelphia State PA Zip Code 19116-1715

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 850.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2014

Transaction ID : C10128270

Amount of Each Receipt this Period
 _____ 250.00

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

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

_____ 1250.00

**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 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 41 Mystic View Ln

City State Zip Code
Doylestown PA 18901-2040

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

Name of Employer Self Occupation 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
05 / 05 / 2014

Transaction ID : C10016377

Amount of Each Receipt this Period
250.00

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

Mailing Address 8 Moredun Place

City State Zip Code
Philadelphia PA 19115

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

Name of Employer AmeriHealth Caritas Occupation VP of Government and External Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : C10015036

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1315 E Montgomery Ave

City State Zip Code
Philadelphia PA 19125-2701

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

Name of Employer The Dunphy Group Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : C10017077

Amount of Each Receipt this Period
250.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 10 OF 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Gary Erlbaum

Mailing Address 44 W Lancaster Ave
Ste 110

City Ardmore State PA Zip Code 19003-1350

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

Name of Employer Greentree Properties Corp. Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : C10016429

Amount of Each Receipt this Period
1100.00

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

Mailing Address 42 W Lancaster Ave
Fl 2

City Ardmore State PA Zip Code 19003-1331

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

Name of Employer Regency Group Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : C10016430

Amount of Each Receipt this Period
1100.00

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

Mailing Address 2038 Washington Ave
2052

City Philadelphia State PA Zip Code 19146-2832

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

Name of Employer VJF Enterprises Inc Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2014

Transaction ID : C10019582

Amount of Each Receipt this Period
1000.00

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

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

3200.00

**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 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 687 Lexington Avenue

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Fitzpatrick Hotels President - North America

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : C10057928

Amount of Each Receipt this Period
500.00

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

Mailing Address 71 Penn Dr

City State Zip Code
West Hartford CT 06119-1153

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
537.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 07 / 2014

Transaction ID : C10063295

Amount of Each Receipt this Period
250.00

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

Mailing Address 1395 Lenape Rd

City State Zip Code
West Chester PA 19382-6816

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

Name of Employer Occupation
The Robert Ford Electric Company President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : C10016433

Amount of Each Receipt this Period
2500.00

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

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

3250.00

**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 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Carly Frame

Mailing Address 119 Christine Dr

City State Zip Code
Downingtown PA 19335-1516

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

Name of Employer Occupation
Citizens for Boyle Staff

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
943.68

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C10126154

Amount of Each Receipt this Period
324.88

* In-Kind: Mileage

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

Mailing Address 322 S 46th St

City State Zip Code
Phila PA 19143-1802

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

Name of Employer Occupation
Irish edition photographer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 19 / 2014

Transaction ID : C10033804

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Patrick Gillespie Jr

Mailing Address 4020 Goshen Rd

City State Zip Code
Newtown Square PA 19073-1517

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

Name of Employer Occupation
Philadelphia Building Trades President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : C10015038

Amount of Each Receipt this Period
1000.00

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

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

1424.88

**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 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
M Janet Gitlin

Mailing Address 133 Andrien Rd

City State Zip Code
Glen Mills PA 19342-1108

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

Name of Employer Occupation
MGitlin Co Inc. Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : C10016438

Amount of Each Receipt this Period
2100.00

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

Mailing Address 133 Andrien Rd

City State Zip Code
Glen Mills PA 19342-1108

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

Name of Employer Occupation
MGitlin Co Inc. Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : C10016439

Amount of Each Receipt this Period
400.00

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

Mailing Address 419 Avenue of the States

City State Zip Code
Chester PA 19013

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

Name of Employer Occupation
CSMI Education Management CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C10108522

Amount of Each Receipt this Period
2500.00

2014 Primary Debt Retirement

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Luke Halinski

Mailing Address 101 Hedgerow Way

City Lansdale State PA Zip Code 19446-5071

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

Name of Employer N/A Occupation volunteer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 21 / 2014

Transaction ID : C10037691

Amount of Each Receipt this Period
250.00

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

Mailing Address 46 Warwick Rd

City Haddonfield State NJ Zip Code 08033-3705

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

Name of Employer Hazzouri and Associates LLC Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : C10015039

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Scott H Heppard

Mailing Address 225 Loring Ct

City Sewell State NJ Zip Code 08080-3005

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

Name of Employer Boyle for Congress Occupation Campaign Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3098.31

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C10126145

Amount of Each Receipt this Period
757.67

* In-Kind: Mileage

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

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

2007.67

**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 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Scott H Heppard

Mailing Address 225 Loring Ct

City Sewell State NJ Zip Code 08080-3005

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

Name of Employer: Boyle for Congress Occupation: Campaign Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **3098.31**

Date of Receipt: **06 / 30 / 2014**

Transaction ID : C10126151

Amount of Each Receipt this Period: **64.00**

* In-Kind: Travel

B. Full Name (Last, First, Middle Initial)
Scott H Heppard

Mailing Address 225 Loring Ct

City Sewell State NJ Zip Code 08080-3005

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

Name of Employer: Boyle for Congress Occupation: Campaign Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **3098.31**

Date of Receipt: **06 / 30 / 2014**

Transaction ID : C10126152

Amount of Each Receipt this Period: **300.00**

* In-Kind: Office Supplies

C. Full Name (Last, First, Middle Initial)
Scott H Heppard

Mailing Address 225 Loring Ct

City Sewell State NJ Zip Code 08080-3005

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

Name of Employer: Boyle for Congress Occupation: Campaign Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **3098.31**

Date of Receipt: **06 / 30 / 2014**

Transaction ID : C10126153

Amount of Each Receipt this Period: **350.00**

* In-Kind: Event Catering

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

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

714.00

**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 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Nicholas Himebaugh

Mailing Address 220 Stallion Ln

City State Zip Code
Schwenksville PA 19473-1855

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

Name of Employer Occupation
PA House of Representatives Legislative Aide

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1756.01

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C10126155

Amount of Each Receipt this Period
55.37

* In-Kind: Mileage

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

Mailing Address 1901 Market St
3rd Floor Legal Department

City State Zip Code
Philadelphia PA 19103-1480

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

Name of Employer Occupation
Independence Blue Cross Vice President, Govt Affairs/Deputy Ge

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : C10016383

Amount of Each Receipt this Period
100.00

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

Mailing Address 1 Greenbriar Cir

City State Zip Code
Newtown PA 18940-2619

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

Name of Employer Occupation
Ballard Spahr 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
05 / 05 / 2014

Transaction ID : C10016372

Amount of Each Receipt this Period
500.00

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

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

655.37

**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 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 1520 Briar Ln

City Feasterville Trevose State PA Zip Code 19053-2386

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : C10015041

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
William J Kenny Jr

Mailing Address 8606 Glenloch St.

City Philadelphia State PA Zip Code 19136-2106

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

Name of Employer BSM Occupation Journalist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : C10013470

Amount of Each Receipt this Period
 200.00

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

Mailing Address 2205 Washington Ln

City Huntingdon Valley State PA Zip Code 19006-5825

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

Name of Employer EHI Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : C10025876

Amount of Each Receipt this Period
 500.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Lorraine Kilkenny

Mailing Address 161 Holbrook RD

City State Zip Code
Holbrook NY 11741-1319

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
2700.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C10102971

Amount of Each Receipt this Period
50.00

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

Mailing Address 10769 Jeanes St

City State Zip Code
Philadelphia PA 19116-3315

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

Name of Employer Amerihealth Caritas Occupation Health Care Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 07 / 2014

Transaction ID : C10063343

Amount of Each Receipt this Period
25.00

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

Mailing Address 117 Chesney Ln

City State Zip Code
Glenside PA 19038-7803

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

Name of Employer Springfield Twp Dems Occupation Dem Committeeperson

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : C10016364

Amount of Each Receipt this Period
250.00

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

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

325.00

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

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

FOR LINE NUMBER: PAGE 19 OF 79
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Michele Lockman

Mailing Address 117 Chesney Ln

City State Zip Code
Glenside PA 19038-7803

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

Name of Employer Occupation
Springfield Twp Dems Dem Committeeperson

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : C10029445

Amount of Each Receipt this Period
100.00

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

Mailing Address 1665 Summit Ave

City State Zip Code
Willow Grove PA 19090-4629

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

Name of Employer Occupation
Fairview Cemetery Funeral Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : C10029443

Amount of Each Receipt this Period
100.00

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

Mailing Address 275 Iroquois Dr

City State Zip Code
Malvern PA 19355-3125

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

Name of Employer Occupation
Charles H. MacDonald Electric Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : C10016442

Amount of Each Receipt this Period
2000.00

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

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) Regina Mahony		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 13 / 2014
Mailing Address 3445 S Utah St		Transaction ID : C10023787
City Arlington	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Nat'l Alliance Public Charter Schls	Occupation SVP	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Jack Malloy		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 13 / 2014
Mailing Address 7645 Loretto Ave		Transaction ID : C10023708
City Phila	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Realtor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 230.00	

Full Name (Last, First, Middle Initial) Michael Markman		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 20 / 2014
Mailing Address 200 Witmer Road Suite 200		Transaction ID : C10057922
City Horsham	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer BET Investments	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 37 Mallard Rise

City Irvington State NY Zip Code 10533-1019

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

Name of Employer Fund for Reconciliation and Developmen Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : C10033847

Amount of Each Receipt this Period
25.00

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

Mailing Address 1921 E Pratt St

City Baltimore State MD Zip Code 21231-1928

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

Name of Employer Roberti White Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 18 / 2014

Transaction ID : C10081812

Amount of Each Receipt this Period
250.00

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

Mailing Address 338 SE 3rd Ter

City Dania Beach State FL Zip Code 33004-4706

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

Name of Employer Trident Corporation Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : C10033851

Amount of Each Receipt this Period
200.00

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

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

475.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Stephen G Pollock Esq		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 3756 Levy Ln		Transaction ID : C10033809
City Huntingdon Valley	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Zarwin Baum	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 425.00	

Full Name (Last, First, Middle Initial) B. Eric Raymond		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 112 Minford Rd		Transaction ID : C10015046
City Bala Cynwyd	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer BenefitVault	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) C. Alice Reyes		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 316 N Lawrence St		Transaction ID : C10014144
City Philadelphia	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Educator	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	2275.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) William Sautter		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 455 Boxwood Rd		Transaction ID : C10026681
City Bryn Mawr	State PA	Zip Code 19010-1255
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Elliot-Lewis	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Craig Spitzer		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address Ten Penn Center 1801 Market Street Suite 2430		Transaction ID : C10108504
City Philadelphia	State PA	Zip Code 19103
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer a2c	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	2014 Primary Debt Retirement

Full Name (Last, First, Middle Initial) Robert S. Taylor		Date of Receipt M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 760 Tower View Cir		Transaction ID : C10057926
City New Hope	State PA	Zip Code 18938-9400
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer The Cameron Companies LLC	Occupation Lawyer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

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

Mailing Address 170 W Tabor Rd
Apt 1

City Philadelphia State PA Zip Code 19120-2930

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 20 / 2014

Transaction ID : C10126157

Amount of Each Receipt this Period
1200.00

* In-Kind: Office Rent

B. Full Name (Last, First, Middle Initial)
Dilworth Paxson LLP

Mailing Address 1500 Market St
Ste 3500E

City Philadelphia State PA Zip Code 19102-2101

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : C10015169

Amount of Each Receipt this Period
1000.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 1500 Market St
Ste 3500E

City Philadelphia State PA Zip Code 19102-2101

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

Name of Employer Dilworth Paxson Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : C10015752

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
*

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

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Malady & Wooten, LLP
 Full Name (Last, First, Middle Initial)
 Mailing Address 604 North Third St.
 City Harrisburg State PA Zip Code 17101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2014
Transaction ID : C10057934
 Amount of Each Receipt this Period
 1000.00
 PARTNERSHIP--partners below if itemized

B. John Malady
 Full Name (Last, First, Middle Initial)
 Mailing Address 604 N. 3rd Street
 City Harrisburg State PA Zip Code 17101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Malady & Wooten Lobbyist
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2014
Transaction ID : C10128276
 Amount of Each Receipt this Period
 1000.00
[MEMO ITEM]
 *

C. ER Legal Management
 Full Name (Last, First, Middle Initial)
 Mailing Address 1634 Spruce St
 City Philadelphia State PA Zip Code 19103-6719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify)
 Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014
Transaction ID : C10069647
 Amount of Each Receipt this Period
 500.00
 PARTNERSHIP--partners below if itemized

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Kenneth Rothweiler

Mailing Address 1634 Spruce St

City Philadelphia State PA Zip Code 19103-6719

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C10069665

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Stewart J Eisenberg

Mailing Address 1634 Spruce St

City Philadelphia State PA Zip Code 19103-6719

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C10069659

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
*

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

Mailing Address 440 E Cornell Dr #4

City Sterling State VA Zip Code 20164

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

Name of Employer Occupation
NADA Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 04 / 2014

Transaction ID : C10021412A

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

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

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

25.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **P.O. BOX 382110**

City **CAMBRIDGE** State **MA** Zip Code **02238**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
2595.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		09		2014

Transaction ID : C10021412AB

Amount of Each Receipt this Period

25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

Mailing Address **440 E Cornell Dr #4**

City **Sterling** State **VA** Zip Code **20164**

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

Name of Employer **NADA** Occupation **Accountant**

Receipt For: 2010
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
325.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : C10071981A

Amount of Each Receipt this Period

25.00

* Earmarked Contribution: See Below

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

Mailing Address **P.O. BOX 382110**

City **CAMBRIDGE** State **MA** Zip Code **02238**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2010
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
2595.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		12		2014

Transaction ID : C10071981AB

Amount of Each Receipt this Period

25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

25.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Harry Citrino III

Mailing Address 1043 Welsh Rd

City Phila State PA Zip Code 19115-2907

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

Name of Employer Little Italy Ristorante, Inc Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
05 / 22 / 2014

Transaction ID : C10052389A

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2595.00

Date of Receipt
05 / 30 / 2014

Transaction ID : C10052389AB

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

Mailing Address 8206 mack street

City alexandria State VA Zip Code 22308-1653

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

Name of Employer Occupation morgan stanley advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
05 / 19 / 2014

Transaction ID : C10045428A

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 29 OF 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2595.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2014

Transaction ID : C10045428AB

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

Mailing Address 6907 Willow St

City State Zip Code
Falls Church VA 22046-2220

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

Name of Employer Occupation
CollaborateUp CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2014

Transaction ID : C10045425A

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2595.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2014

Transaction ID : C10045425AB

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Charles E Feldman

Mailing Address 9679 Pine Road

City Philadelphia State PA Zip Code 19115-2747

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

Name of Employer Garden of Earthly delights Occupation store owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2014

Transaction ID : C10038662A

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2595.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2014

Transaction ID : C10038662AB

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

Mailing Address 139 N Cliffwood Ave

City Los Angeles State CA Zip Code 90049-2613

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

Name of Employer self Occupation phtographer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2014

Transaction ID : C10052392A

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2595.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : C10052392AB

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
William J Kenny Jr

Mailing Address 8606 Glenloch St.

City State Zip Code
Philadelphia PA 19136-2106

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

Name of Employer Occupation
BSM Journalist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C10108338A

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2595.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C10108338AB

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Lorraine Kilkenny

Mailing Address 161 Holbrook RD

City: Holbrook State: NY Zip Code: 11741-1319

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: 2700.00

Date of Receipt: 06 / 30 / 2014

Transaction ID : C10108336A

Amount of Each Receipt this Period: 50.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City: CAMBRIDGE State: MA Zip Code: 02238

FEC ID number of contributing federal political committee: **C C00401224**

Name of Employer: Occupation: Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2595.00

Date of Receipt: 06 / 30 / 2014

Transaction ID : C10108336AB

Amount of Each Receipt this Period: 50.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

Mailing Address 10769 Jeanes St

City: Philadelphia State: PA Zip Code: 19116-3315

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

Name of Employer: Amerihealth Caritas Occupation: Health Care Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 210.00

Date of Receipt: 05 / 19 / 2014

Transaction ID : C10045426A

Amount of Each Receipt this Period: 25.00

* Earmarked Contribution: See Below

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

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

75.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2595.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2014

Transaction ID : C10045426AB

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
R. Emmett Madden

Mailing Address 101 Greenwood Ave 5th Fl

City State Zip Code
Jenkintown PA 19046

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

Name of Employer Occupation
Lawyer Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2014

Transaction ID : C10038663A

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2595.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2014

Transaction ID : C10038663AB

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 79
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Joseph Proietta

Mailing Address 365 Peachtree Drive

City: Jenkintown State: PA Zip Code: 19046-5002

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

Name of Employer: Community Academy Charter School Occupation: Educator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 05 / 15 / 2014

Transaction ID : C10038664A

Amount of Each Receipt this Period: 100.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City: CAMBRIDGE State: MA Zip Code: 02238

FEC ID number of contributing federal political committee: **C C00401224**

Name of Employer: Conduit total listed in Agg. field Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2595.00

Date of Receipt: 05 / 20 / 2014

Transaction ID : C10038664AB

Amount of Each Receipt this Period: 100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

Mailing Address 1313 S 11th St

City: Philadelphia State: PA Zip Code: 19147-5601

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

Name of Employer: American Water Occupation: Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 335.00

Date of Receipt: 05 / 15 / 2014

Transaction ID : C10038665A

Amount of Each Receipt this Period: 50.00

* Earmarked Contribution: See Below

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 35 OF 79
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2595.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2014

Transaction ID : C10038665AB

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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).....

0.00

37201.92

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

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

FOR LINE NUMBER: PAGE 36 OF 79
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
4MA PAC

Mailing Address **PO BOX 590-464**

City **NEWTON** State **MA** Zip Code **02459**

FEC ID number of contributing federal political committee. **C C00543504**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 13 / 2014

Transaction ID : C10086541

Amount of Each Receipt this Period
500.00

2014 Primary Debt Retirement

B. Full Name (Last, First, Middle Initial)
4MA PAC

Mailing Address **PO BOX 590-464**

City **NEWTON** State **MA** Zip Code **02459**

FEC ID number of contributing federal political committee. **C C00543504**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 18 / 2014

Transaction ID : C10086542

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address **1625 MASSACHUSETTS AVE. NW**

City **WASHINGTON** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00035451**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 23 / 2014

Transaction ID : C10108381

Amount of Each Receipt this Period
2500.00

2014 Primary Debt Retirement

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: PAGE 37 OF 79
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Mailing Address 777 6TH STREET, NW
SUITE 200

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : C10108527

Amount of Each Receipt this Period
5000.00

2014 Primary Debt Retirement

B. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Mailing Address 777 6TH STREET, NW
SUITE 200

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : C10108528

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF GOVT. EMPL. POLITICAL ACTION COMMITTEE

Mailing Address 80 F STREET, NW

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : C10108525

Amount of Each Receipt this Period
2000.00

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

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

12000.00

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

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

FOR LINE NUMBER: PAGE 38 OF 79
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036-5665

FEC ID number of contributing federal political committee. **C** C90011172

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C10108540

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN POSTAL WORKERS UNION COMMITTEE ON POLITICAL ACTION

Mailing Address 1300 L STREET NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010322

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C10108536

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN TRAFFIC SAFETY SERVICES ASSOCIATION PAC

Mailing Address 15 Riverside Pkwy Ste 100

City Fredericksburg State VA Zip Code 22406-1077

FEC ID number of contributing federal political committee. **C** C00281717

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : C10108511

Amount of Each Receipt this Period
500.00

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: PAGE 39 OF 79
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
AMERIPAC: THE FUND FOR A GREATER AMERICA

Mailing Address 700 13TH STREET, NW
SUITE 600

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00271338**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 18 / 2014

Transaction ID : C10086504

Amount of Each Receipt this Period
5000.00

2014 Primary Debt Retirement

B. Full Name (Last, First, Middle Initial)
ANNA ESHOO FOR CONGRESS

Mailing Address 555 Capitol Mall
Ste 1425

City State Zip Code
Sacramento CA 95814-4602

FEC ID number of contributing federal political committee. **C C00258475**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C10125024

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
CSX CORPORATION GOOD GOVERNMENT FUND

Mailing Address 1331 Pennsylvania Ave NW
Ste 560

City State Zip Code
Washington DC 20004-1745

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 18 / 2014

Transaction ID : C10086557

Amount of Each Receipt this Period
1000.00

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 40 OF 79
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
DUANE MORRIS GOVERNMENT COMMITTEE

Mailing Address 30 S 17th St

City Philadelphia State PA Zip Code 19103-4016

FEC ID number of contributing federal political committee. **C** C00364133

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2014

Transaction ID : C10026680

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
DUANE MORRIS GOVERNMENT COMMITTEE

Mailing Address 30 S 17th St

City Philadelphia State PA Zip Code 19103-4016

FEC ID number of contributing federal political committee. **C** C00364133

Name of Employer Occupation

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
 05 / 20 / 2014

Transaction ID : C10057924

Amount of Each Receipt this Period
 500.00

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

Mailing Address PO Box 22596

City Philadelphia State PA Zip Code 19110-2596

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2014

Transaction ID : C10086553

Amount of Each Receipt this Period
 500.00

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

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

2000.00

**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 41 OF 79
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Friends of Frank Dermody

Mailing Address **PO Box 274**

City **Tarentum** State **PA** Zip Code **15084-0274**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 05 / 2014

Transaction ID : C10015049

Amount of Each Receipt this Period
1000.00

Permissible Funds

B. Full Name (Last, First, Middle Initial)
Friends of Mark Levy

Mailing Address **PO Box 176**

City **Norristown** State **PA** Zip Code **19404-0176**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 12 / 2014

Transaction ID : C10029435

Amount of Each Receipt this Period
250.00

Permissible Funds

C. Full Name (Last, First, Middle Initial)
HOYER FOR CONGRESS

Mailing Address **700 13TH STREET, NW
SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00140715**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 18 / 2014

Transaction ID : C10086531

Amount of Each Receipt this Period
2000.00

2014 Primary Debt Retirement

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

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

3250.00

**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 42 OF 79
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial)
INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC

Mailing Address 1750 NEW YORK AVE NW
City WASHINGTON State DC Zip Code 20006

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : C10125023

FEC ID number of contributing federal political committee. **C** C00029447

Amount of Each Receipt this Period
5000.00

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date
10000.00

Full Name (Last, First, Middle Initial)
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION AFL-CIO COMMITTEE ON POLITICAL EDUCATION

Mailing Address 5000 W Side Ave
City North Bergen State NJ Zip Code 07047-6439

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 12 / 2014

Transaction ID : C10086565

FEC ID number of contributing federal political committee. **C** C00158576

Amount of Each Receipt this Period
5000.00

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date
10000.00

Full Name (Last, First, Middle Initial)
JOBS, OPPORTUNITIES AND EDUCATION PAC (JOE-PAC)

Mailing Address 410 1st St SE Ste 310
City Washington State DC Zip Code 20003-1819

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 18 / 2014

Transaction ID : C10086536

FEC ID number of contributing federal political committee. **C** C00362384

Amount of Each Receipt this Period
5000.00

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date
10000.00

2014 Primary Debt Retirement

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

15000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 79
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
JOBS, OPPORTUNITIES AND EDUCATION PAC (JOE-PAC)

Mailing Address 410 1st St SE
Ste 310

City Washington State DC Zip Code 20003-1819

FEC ID number of contributing federal political committee. **C** C00362384

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 18 / 2014

Transaction ID : C10086567

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
JOBS, OPPORTUNITIES AND EDUCATION PAC (JOE-PAC)

Mailing Address 410 1st St SE
Ste 310

City Washington State DC Zip Code 20003-1819

FEC ID number of contributing federal political committee. **C** C00362384

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 18 / 2014

Transaction ID : C10086568

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
K&L GATES LLP POLITICAL ACTION COMMITTEE (DC)

Mailing Address 1601 K STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C10108533

Amount of Each Receipt this Period
1000.00

2014 Primary Debt Retirement

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

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

6000.00

**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 44 OF 79
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Keystone Fund

Mailing Address 607 14th St., NW Suite 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00381681**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : C10108513

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
LEADERSHIP OF TODAY AND TOMORROW

Mailing Address 700 13th St NW Ste 600

City Washington State DC Zip Code 20005-3960

FEC ID number of contributing federal political committee. **C C00299149**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 18 / 2014

Transaction ID : C10086550

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Markosek for State Legislature

Mailing Address PO Box 193

City Monroeville State PA Zip Code 15146-0193

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 07 / 2014

Transaction ID : C10017164

Amount of Each Receipt this Period
500.00

Permissible Funds

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: PAGE 45 OF 79
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Mailing Address 100 DAINGERFIELD ROAD

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00030809**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : C10108500

Amount of Each Receipt this Period
 1500.00

2014 Primary Debt Retirement

B. Full Name (Last, First, Middle Initial)
NELSON MULLINS RILEY & SCARBOROUGH, LLP FEDERAL POLITICAL COMMITTEE

Mailing Address 1320 MAIN STREET, 17TH FLOOR

City COLUMBIA State SC Zip Code 29201

FEC ID number of contributing federal political committee. **C C00278895**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 18 / 2014

Transaction ID : C10086532

Amount of Each Receipt this Period
 1000.00

2014 Primary Debt Retirement

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

Mailing Address 200 CIVIC CENTER DRIVE

City COLUMBUS State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C C00051979**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 2300.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : C10108377

Amount of Each Receipt this Period
 2000.00

2014 Primary Debt Retirement

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 79
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
PALLONE FOR CONGRESS

Mailing Address **PO Box 3176**

City **Long Branch** State **NJ** Zip Code **07740-3176**

FEC ID number of contributing federal political committee. **C C00226928**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 29 / 2014

Transaction ID : C10057939

Amount of Each Receipt this Period
2000.00

2014 Primary Debt Retirement

B. Full Name (Last, First, Middle Initial)
PECO ENERGY COMPANY FEDERAL PAC

Mailing Address **2301 Market St # S21-1**

City **Philadelphia** State **PA** Zip Code **19103-1338**

FEC ID number of contributing federal political committee. **C C00160101**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 09 / 2014

Transaction ID : C10019583

Amount of Each Receipt this Period
1000.00

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

Mailing Address **555 Capitol Mall Ste 1425**

City **Sacramento** State **CA** Zip Code **95814-4602**

FEC ID number of contributing federal political committee. **C C00557850**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : C10086547

Amount of Each Receipt this Period
2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 79
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
RICHARD E NEAL FOR CONGRESS COMMITTEE

Mailing Address 76 Magnolia Ter

City Springfield State MA Zip Code 01108-2533

FEC ID number of contributing federal political committee. **C C00226522**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 18 / 2014

Transaction ID : C10086548

Amount of Each Receipt this Period
2000.00

2014 Primary Debt Retirement

B. Full Name (Last, First, Middle Initial)
TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 501 THIRD ST. NW 9TH FLOOR

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00008268**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C10108531

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
TRANSPORTATION TRADES DEPARTMENT AFL-CIO POLITICAL ACTION COMMITTEE (TTD/PAC)

Mailing Address 815 16th St NW
FI 4

City Washington State DC Zip Code 20006-4101

FEC ID number of contributing federal political committee. **C C00280909**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 18 / 2014

Transaction ID : C10086564

Amount of Each Receipt this Period
500.00

2014 Primary Debt Retirement

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

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

7500.00

**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 48 OF 79
	<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
ULLICO INC. POLITICAL ACTION COMMITTEE (ULLIPAC)

Mailing Address 1625 I St NW

City Washington State DC Zip Code 20006-4061

FEC ID number of contributing federal political committee. **C** C00236760

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2014

Transaction ID : C10086552

Amount of Each Receipt this Period
 1000.00

2014 Primary Debt Retirement

B. Full Name (Last, First, Middle Initial)
UNITED FOOD AND COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Mailing Address 1775 K STREET N.W.

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00002766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2014

Transaction ID : C10017166

Amount of Each Receipt this Period
 1500.00

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).....

2500.00

75250.00

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

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

FOR LINE NUMBER: PAGE 49 OF 79
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Brendan Boyle

Mailing Address **PO Box 11545**

City **Philadelphia** State **PA** Zip Code **19116**

FEC ID number of contributing federal political committee. **C H4PA13199**

Name of Employer **PA House of Reps** Occupation **Representative**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
131393.73

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : **C10126156**

Amount of Each Receipt this Period
1053.16

* In-Kind: Mileage

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).....

1053.16

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

1053.16

**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 50 OF 79
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Brendan Boyle		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 07 / 2014
Mailing Address PO Box 11545		Transaction ID : C10016647
City Philadelphia	State Zip Code PA 19116	
FEC ID number of contributing federal political committee. C H4PA13199		Amount of Each Receipt this Period 40000.00
Name of Employer PA House of Reps	Occupation Representative	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 131393.73	

Full Name (Last, First, Middle Initial) B. Brendan Boyle		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 19 / 2014
Mailing Address PO Box 11545		Transaction ID : C10042547
City Philadelphia	State Zip Code PA 19116	
FEC ID number of contributing federal political committee. C H4PA13199		Amount of Each Receipt this Period 30000.00
Name of Employer PA House of Reps	Occupation Representative	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 131393.73	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	70000.00
TOTAL This Period (last page this line number only).....	70000.00

**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 51 OF 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 0.99 Transaction ID : D475579
City Cambridge	State MA	
Zip Code 02238-2110	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 18.77 Transaction ID : D477246
City Cambridge	State MA	
Zip Code 02238-2110	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 38.92 Transaction ID : D477626
City Cambridge	State MA	
Zip Code 02238-2110	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: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	58.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 1.98 Transaction ID : D476464
City Cambridge	State MA	
Zip Code 02238-2110	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 25.69 Transaction ID : D477021
City Cambridge	State MA	
Zip Code 02238-2110	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 0.99 Transaction ID : D479623
City Cambridge	State MA	
Zip Code 02238-2110	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: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	28.66
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 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 11.28 Transaction ID : D481343
City Cambridge	State MA	
Zip Code 02238-2110	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: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Khaleef Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 5517 Irving St		Amount of Each Disbursement this Period 100.00 Transaction ID : D483047
City Philadelphia	State PA	
Zip Code 19139-3926	Purpose of Disbursement Get-out-the-Vote Canvassing Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Rep Brendan Boyle		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO Box 11545		Amount of Each Disbursement this Period 1053.16 Transaction ID : D483793
City Philadelphia	State PA	
Zip Code 19116	Purpose of Disbursement Mileage	Category/ Type
Candidate Name Rep Brendan Boyle	Office Sought: <input checked="" 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: PA District: 13	* In-Kind Received

SUBTOTAL of Disbursements This Page (optional).....	1164.44
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Carl Dash		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 6213 Morton St		Amount of Each Disbursement this Period 90564.14 Transaction ID : D483075
City Philadelphia	State PA Zip Code 19144-1612	
Purpose of Disbursement Get-out-the-Vote Canvassing Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Dudley Media		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 919 Catharine St		Amount of Each Disbursement this Period 66214.14 Transaction ID : D475604
City Philadelphia	State PA Zip Code 19147-2740	
Purpose of Disbursement Media Buy		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Dudley Media		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 919 Catharine St		Amount of Each Disbursement this Period 24250.00 Transaction ID : D475661
City Philadelphia	State PA Zip Code 19147-2740	
Purpose of Disbursement Media Buy		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	90564.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 79			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Dudley Media		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 919 Catharine St		Amount of Each Disbursement this Period 32000.00 Transaction ID : D476823
City Philadelphia	State PA Zip Code 19147-2740	
Purpose of Disbursement Media Buy	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. First Data		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 320.63 Transaction ID : D483220
City Atlanta	State GA Zip Code 30342-1651	
Purpose of Disbursement Merchant Fees	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. First Data		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 335.72 Transaction ID : D483221
City Atlanta	State GA Zip Code 30342-1651	
Purpose of Disbursement Merchant Fees	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).....	32656.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Carly Frame		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 119 Christine Dr		Amount of Each Disbursement this Period 324.88 Transaction ID : D483789
City Downingtown	State PA	
Zip Code 19335-1516	Purpose of Disbursement Mileage	* In-Kind Received
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:		

Full Name (Last, First, Middle Initial) B. Gerstein, Bocian, Agne, Strategies		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 1901 L St NW Ste 702		Amount of Each Disbursement this Period 21500.00 Transaction ID : D475606
City Washington	State DC	
Zip Code 20036-3511	Purpose of Disbursement Polling Services	* In-Kind Received
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Mr. Scott H Heppard		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 225 Loring Ct		Amount of Each Disbursement this Period 757.67 Transaction ID : D483781
City Sewell	State NJ	
Zip Code 08080-3005	Purpose of Disbursement Mileage	* In-Kind Received
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).....	22582.55
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 79			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Mr. Scott H Heppard		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 225 Loring Ct		Amount of Each Disbursement this Period 64.00
City Sewell	State NJ	
Zip Code 08080-3005	Purpose of Disbursement Travel	Transaction ID : D483785
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)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. Scott H Heppard		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 225 Loring Ct		Amount of Each Disbursement this Period 300.00
City Sewell	State NJ	
Zip Code 08080-3005	Purpose of Disbursement Office Supplies	Transaction ID : D483786
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)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) c. Mr. Scott H Heppard		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 225 Loring Ct		Amount of Each Disbursement this Period 350.00
City Sewell	State NJ	
Zip Code 08080-3005	Purpose of Disbursement Event Catering	Transaction ID : D483787
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)	* In-Kind Received
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	714.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 79			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Nicholas Himebaugh		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 220 Stallion Ln		Amount of Each Disbursement this Period 55.37
City Schwenksville	State PA	
Zip Code 19473-1855	Purpose of Disbursement Mileage	Transaction ID : D483791
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)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) B. Kennedy Communications		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 926 N St NW Studio R7		Amount of Each Disbursement this Period 30973.00
City Washington	State DC	
Zip Code 20001-4485	Purpose of Disbursement Design and Printing Services	Transaction ID : D475080
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Liberty Building Associates		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 13050 Bustleton Ave		Amount of Each Disbursement this Period 900.00
City Philadelphia	State PA	
Zip Code 19116-1631	Purpose of Disbursement Office Rent	Transaction ID : D474679
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	31928.37
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Liberty Building Associates			Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014	
Mailing Address 13050 Bustleton Ave			Amount of Each Disbursement this Period 900.00	
City Philadelphia	State PA	Zip Code 19116-1631	Transaction ID : D479540	
Purpose of Disbursement Office Rent		Category/ Type		
Candidate Name				
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:				

Full Name (Last, First, Middle Initial) B. NGP VAN Inc.			Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014	
Mailing Address 1101 15th St. NW			Amount of Each Disbursement this Period 40.00	
City Washington	State DC	Zip Code 20005	Transaction ID : D479542	
Purpose of Disbursement Software Licencing Fee		Category/ Type		
Candidate Name				
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:				

Full Name (Last, First, Middle Initial) C. NGP VAN Inc.			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address 1101 15th St. NW			Amount of Each Disbursement this Period 165.00	
City Washington	State DC	Zip Code 20005	Transaction ID : D476093	
Purpose of Disbursement Software Licensing Fee		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1105.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 79			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. NGP VAN Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 1101 15th St. NW		Amount of Each Disbursement this Period 2100.00
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Software Licensing Fee	Transaction ID : D477189
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:		

Full Name (Last, First, Middle Initial) B. O'Brien Printing		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 324 Dorrance St		Amount of Each Disbursement this Period 1333.48
City Bristol	State PA	
Zip Code 19007	Purpose of Disbursement Printing	Transaction ID : D476700
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. O'Brien Printing		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 324 Dorrance St		Amount of Each Disbursement this Period 443.08
City Bristol	State PA	
Zip Code 19007	Purpose of Disbursement Printing	Transaction ID : D475314
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3876.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. O'Brien Printing			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address 324 Dorrance St			Amount of Each Disbursement this Period 3362.32	
City Bristol	State PA	Zip Code 19007	Transaction ID : D479799	
Purpose of Disbursement Printing		Category/ Type		
Candidate Name				
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:				

Full Name (Last, First, Middle Initial) B. O'Brien Printing			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014	
Mailing Address 324 Dorrance St			Amount of Each Disbursement this Period 942.34	
City Bristol	State PA	Zip Code 19007	Transaction ID : D497199	
Purpose of Disbursement Printing		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Paychex, Inc.			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 70.15	
City Rochester	State NY	Zip Code 14625-2311	Transaction ID : D474600	
Purpose of Disbursement Payroll		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	4374.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 1133.28 Transaction ID : D474601
City Rochester State NY Zip Code 14625-2311	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 73.15 Transaction ID : D477001
City Rochester State NY Zip Code 14625-2311	Purpose of Disbursement Payroll Processing Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 1133.28 Transaction ID : D477002
City Rochester State NY Zip Code 14625-2311	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2339.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 79			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Paychex, Inc.		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 951.51 Transaction ID : D479769
City Rochester	State NY Zip Code 14625-2311	
Purpose of Disbursement Payroll Processing Fee	Category/Type	
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) B. Paychex, Inc.		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 805.00 Transaction ID : D479770
City Rochester	State NY Zip Code 14625-2311	
Purpose of Disbursement Payroll Taxes	Category/Type	
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) c. Paychex, Inc.		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 73.36 Transaction ID : D478691
City Rochester	State NY Zip Code 14625-2311	
Purpose of Disbursement Payroll Processing Fee	Category/Type	
Candidate Name		
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).....	951.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 1133.30
City Rochester	State NY Zip Code 14625-2311	
Purpose of Disbursement Payroll Taxes	Category/Type	Transaction ID : D478692
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) B. Political Compliance Management Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 1050 17th St NW Ste 590		Amount of Each Disbursement this Period 1548.62
City Washington	State DC Zip Code 20036-5592	
Purpose of Disbursement Accounting Services	Category/Type	Transaction ID : D475605
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Political Compliance Management Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1050 17th St NW Ste 590		Amount of Each Disbursement this Period 1503.43
City Washington	State DC Zip Code 20036-5592	
Purpose of Disbursement Accounting Services	Category/Type	Transaction ID : D479798
Candidate Name		
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).....	4185.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 79			
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Barry Thomas		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 170 W Tabor Rd Apt 1		Amount of Each Disbursement this Period 1200.00 Transaction ID : D483794
City Philadelphia	State PA Zip Code 19120-2930	
Purpose of Disbursement Office Rent	Category/Type	* In-Kind Received
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 3000 Chestnut St		Amount of Each Disbursement this Period 19.99 Transaction ID : D483222
City Philadelphia	State PA Zip Code 19104-5003	
Purpose of Disbursement Postage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Wells Fargo Bank, NA		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 30.00 Transaction ID : D483223
City Portland	State OR Zip Code 97228-6995	
Purpose of Disbursement Banking Service Charge	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1249.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Wells Fargo Bank, NA		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 30.00 Transaction ID : D483224
City Portland	State OR	
Zip Code 97228-6995	Purpose of Disbursement Banking Service Charge	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Wells Fargo Bank, NA		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 45.00 Transaction ID : D483225
City Portland	State OR	
Zip Code 97228-6995	Purpose of Disbursement Banking Service Charge	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Wells Fargo Bank, NA		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 97.80 Transaction ID : D483226
City Portland	State OR	
Zip Code 97228-6995	Purpose of Disbursement Banking Service Charge	Category/ Type
Candidate Name	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).....	172.80
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 67 OF 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Wells Fargo Bank, NA		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address PO Box 6995		Amount of Each Disbursement this Period 3.00
City Portland	State OR	
Zip Code 97228-6995	Purpose of Disbursement Banking Service Charge	Transaction ID : D483227
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:		

Full Name (Last, First, Middle Initial) B. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 2745.58
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Payroll	Transaction ID : D474602
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Adam Erickson		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 54 Hassart St Apt B2		Amount of Each Disbursement this Period 1344.53
City New Brunswick	State NJ	
Zip Code 08901-2557	Purpose of Disbursement Payroll	Transaction ID : D474603
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2748.53
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 68 OF 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Carly Frame		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 119 Christine Dr		Amount of Each Disbursement this Period 381.54
City Downingtown	State PA	
Zip Code 19335-1516	Purpose of Disbursement Payroll	Transaction ID : D474604
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. Scott H Heppard		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 225 Loring Ct		Amount of Each Disbursement this Period 1019.51
City Sewell	State NJ	
Zip Code 08080-3005	Purpose of Disbursement Payroll	Transaction ID : D474605
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 2745.58
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Payroll	Transaction ID : D477003
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2745.58
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Adam Erickson		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 54 Hassart St Apt B2		Amount of Each Disbursement this Period 1344.54
City New Brunswick	State NJ	
Zip Code 08901-2557	Purpose of Disbursement Payroll	Transaction ID : D477004
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Carly Frame		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 119 Christine Dr		Amount of Each Disbursement this Period 381.54
City Downingtown	State PA	
Zip Code 19335-1516	Purpose of Disbursement Payroll	Transaction ID : D477005
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Mr. Scott H Heppard		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 225 Loring Ct		Amount of Each Disbursement this Period 1019.50
City Sewell	State NJ	
Zip Code 08080-3005	Purpose of Disbursement Payroll	Transaction ID : D477006
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 2745.56
City Rochester	State NY Zip Code 14625-2311	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : D478693
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) B. Adam Erickson		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 54 Hassart St Apt B2		Amount of Each Disbursement this Period 1344.53
City New Brunswick	State NJ Zip Code 08901-2557	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : D478694 [MEMO ITEM]
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) c. Carly Frame		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 119 Christine Dr		Amount of Each Disbursement this Period 381.54
City Downingtown	State PA Zip Code 19335-1516	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : D478695 [MEMO ITEM]
Candidate Name		
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).....	2745.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Mr. Scott H Heppard		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 225 Loring Ct		Amount of Each Disbursement this Period 1019.49
City Sewell	State NJ	
Zip Code 08080-3005	Purpose of Disbursement Payroll	Transaction ID : D478697
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex, Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 1749.63
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Payroll	Transaction ID : D479771
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:		

Full Name (Last, First, Middle Initial) c. Carly Frame		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 119 Christine Dr		Amount of Each Disbursement this Period 730.12
City Downingtown	State PA	
Zip Code 19335-1516	Purpose of Disbursement Payroll	Transaction ID : D479772
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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1749.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 79	
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Mr. Scott H Heppard		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 225 Loring Ct		Amount of Each Disbursement this Period 1019.51
City Sewell State NJ Zip Code 08080-3005	Purpose of Disbursement Payroll	Transaction ID : D479773
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Carly Frame		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 119 Christine Dr		Amount of Each Disbursement this Period 76.78
City Downingtown State PA Zip Code 19335-1516	Purpose of Disbursement Reimbursement	Transaction ID : D479801
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:		

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	
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).....	76.78
TOTAL This Period (last page this line number only).....	208019.05

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Citizens for Boyle

Transaction ID : L927

LOAN SOURCE Full Name (Last, First, Middle Initial)

Rep Brendan Boyle

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
PO Box 11545

City State ZIP Code
Philadelphia PA 19116

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40000.00	0.00	40000.00

TERMS

Date Incurred: M 05 / D 07 / Y 2014
 Date Due: M / D / Y No Due Date
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 40000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Citizens for Boyle

Transaction ID : **L929**

LOAN SOURCE Full Name (Last, First, Middle Initial)

Rep Brendan Boyle

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
PO Box 11545

City State ZIP Code
Philadelphia PA 19116

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

TERMS

Date Incurred: M 05 / D 19 / Y 2014
 Date Due: M / D / Y No Due Date
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional).....	▶	30000.00
TOTALS This Period (last page in this line only).....	▶	70000.00

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

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rep Brendan Boyle	Nature of Debt (Purpose): Reimbursement, Printing/Postage - 2014 Primary Debt
Mailing Address PO Box 11545	
City State Zip Code Philadelphia PA 19116	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D482996	
Amount Incurred This Period 17891.07	Payment This Period 0.00	Outstanding Balance at Close of This Period 17891.07

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Decision Communications LLC	Nature of Debt (Purpose): Automated Phone Calls - 2014 Primary Debt
Mailing Address 10 Canal Street, Suite 228	
City State Zip Code Bristol PA 19007	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D482977	
Amount Incurred This Period 1800.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1800.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Adam Erickson	Nature of Debt (Purpose): Automated Phone Calls, Event Food, Supplies - 2014 Primary Debt
Mailing Address 54 Hassart St Apt B2	
City State Zip Code New Brunswick NJ 08901-2557	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D482438	
Amount Incurred This Period 7270.62	Payment This Period 0.00	Outstanding Balance at Close of This Period 7270.62

1) SUBTOTALS This Period This Page (optional)	26961.69
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gerstein, Bocian, Agne, Strategies	Nature of Debt (Purpose): Polling Services
Mailing Address 1901 L St NW Ste 702	
City State Zip Code Washington DC 20036-3511	

Outstanding Balance Beginning This Period 21500.00	Transaction ID : D475082	
Amount Incurred This Period 0.00	Payment This Period 21500.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Scott H Heppard	Nature of Debt (Purpose): Telephones, Event Food, Supplies - 2014 Primary Debt
Mailing Address 225 Loring Ct	
City State Zip Code Sewell NJ 08080-3005	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D482440	
Amount Incurred This Period 3059.42	Payment This Period 0.00	Outstanding Balance at Close of This Period 3059.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jaci Downs Photography	Nature of Debt (Purpose): Event Photography Services - Primary Debt
Mailing Address 87 Walnut St	
City State Zip Code Conshohocken PA 19428-1955	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D482981	
Amount Incurred This Period 375.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 375.00

1) SUBTOTALS This Period This Page (optional)	3434.42
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Citizens for Boyle

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
John Linnie Enterprises

Nature of Debt (Purpose):
 Printing, 2014 Primary Debt

Mailing Address 19 Frelinghuysen Ave

City State Zip Code
 Raritan NJ 08869-1920

Outstanding Balance Beginning This Period
 0.00

Transaction ID : D482442

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
 2285.00 0.00 2285.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Kennedy Communications

Nature of Debt (Purpose):
 Design & Printing Services - 2014 Primary Debt

Mailing Address 926 N St NW
 Studio R7

City State Zip Code
 Washington DC 20001-4485

Outstanding Balance Beginning This Period
 0.00

Transaction ID : D483005

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
 35451.00 0.00 35451.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
O'Brien Printing

Nature of Debt (Purpose):
 Printing

Mailing Address 324 Dorrance St

City State Zip Code
 Bristol PA 19007

Outstanding Balance Beginning This Period
 942.34

Transaction ID : D475201

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
 0.00 942.34 0.00

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

37736.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Compliance Management Services	Nature of Debt (Purpose): Accounting Services
Mailing Address 1050 17th St NW Ste 590	
City State Zip Code Washington DC 20036-5592	

Outstanding Balance Beginning This Period 3052.05	Transaction ID : D475083	
Amount Incurred This Period 0.00	Payment This Period 3052.05	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Compliance Management Services	Nature of Debt (Purpose): Accounting Services 2014 Primary Debt
Mailing Address 1050 17th St NW Ste 590	
City State Zip Code Washington DC 20036-5592	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D482984	
Amount Incurred This Period 1590.27	Payment This Period 0.00	Outstanding Balance at Close of This Period 1590.27

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Compliance Management Services	Nature of Debt (Purpose): Accounting Services - General Election
Mailing Address 1050 17th St NW Ste 590	
City State Zip Code Washington DC 20036-5592	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D482992	
Amount Incurred This Period 1544.82	Payment This Period 0.00	Outstanding Balance at Close of This Period 1544.82

1) SUBTOTALS This Period This Page (optional)	3135.09
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Snyder Pickerill Media Group, LLC		Nature of Debt (Purpose): Media Production Services - 2014 Primary Debt
Mailing Address 230 W Huron St		
City State Zip Code Chicago IL 60654-3981		

Outstanding Balance Beginning This Period 0.00	Transaction ID : D483009	
Amount Incurred This Period 12005.92	Payment This Period 0.00	Outstanding Balance at Close of This Period 12005.92

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period	Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period	Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period	

1) SUBTOTALS This Period This Page (optional)	12005.92
2) TOTALS This Period (last page this line number only)	83273.12
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	70000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	153273.12