

**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

Fattah For Congress

ADDRESS (number and street)

P.O. Box 30743

Check if different
than previously
reported. (ACC)

Philadelphia

PA

19104

2. FEC IDENTIFICATION NUMBER ▼

C

C00254441

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

PA

02

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

M M /

D D /

Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Mr. Roger Jackson

Signature of Treasurer

Mr. Roger Jackson

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Fattah For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

	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))....	14720.00	83885.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	14720.00	83885.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	9654.29	9654.29
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	9654.29	9654.29
8. Cash on Hand at Close of Reporting Period (from Line 27).....	7673.30	
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)	-1785.50	

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)

PAGE 3 / 20

Write or Type Committee Name

Fattah For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

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).....

4200.00

72650.00

(ii) Unitemized.....

20.00

735.00

(iii) TOTAL of contributions from individuals ▶

4220.00

73385.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

10500.00

10500.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

14720.00

83885.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

14720.00

83885.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 20

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	9654.29	9654.29
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	9654.29	9654.29

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2607.59
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	14720.00
25. SUBTOTAL (add Line 23 and Line 24).....	17327.59
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	9654.29
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	7673.30

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 20

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

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)
Fattah For Congress

A. Full Name (Last, First, Middle Initial)
Jeffrey Brown

Mailing Address 700 Delsea Drive

City State Zip Code
Westville NJ 08093

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

Name of Employer Occupation
Brown's Super Stores Executive

Receipt For: 2015
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt

M M	D D	Y Y Y Y
10	17	2015

Transaction ID : VPFC0G066R8

Amount of Each Receipt this Period

2700.00

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

Mailing Address 502 N 11th St

City State Zip Code
McAllen TX 78501-4526

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

Name of Employer Occupation
US House of Representative Congressman

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt

M M	D D	Y Y Y Y
12	29	2015

Transaction ID : VPFC0GJGJ91

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

Amount of Each Receipt this Period

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

4200.00

4200.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 20

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

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NAME OF COMMITTEE (In Full)
Fattah For Congress**A.** Full Name (Last, First, Middle Initial)
FLORIDA SUGAR CANE LEAGUE PAC

Mailing Address 1301 Pennsylvania Ave NW

City	State	Zip Code
Washington	DC	20004-1729

FEC ID number of contributing
federal political committee.**C** C00012328

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : VPFC0GJG6T0

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Ironworkers Political Action League

Mailing Address 1750 New York Ave NW

City	State	Zip Code
Washington	DC	20006-5301

FEC ID number of contributing
federal political committee.**C** C00027359

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		02		2015

Transaction ID : VPFC0GJG6K4

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACMailing Address 1101 King St
Ste 600

City	State	Zip Code
Alexandria	VA	22314-2965

FEC ID number of contributing
federal political committee.**C** C00144766

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : VPFC0GJG6W6

Amount of Each Receipt this Period

2500.00

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

8000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 20

<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)
Fattah For Congress

Full Name (Last, First, Middle Initial)

Sheet Metal Workers' International Association PAC

Mailing Address 1750 New York Ave NW

City

Washington

State

DC

Zip Code

20006-5386

FEC ID number of contributing
federal political committee.**C** C00007542

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2015

Transaction ID : VPFC0GJG6C9

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

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

2500.00

10500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 20

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

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NAME OF COMMITTEE (In Full)

Fattah For Congress

Full Name (Last, First, Middle Initial)

A. Ally

Mailing Address PO Box 380901

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2015

City	State	Zip Code
Minneapolis	MN	55438-0901

Purpose of Disbursement
Payment

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

708.75

Transaction ID : VPECRA153D3

B. Ally

Mailing Address PO Box 380901

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2015

City	State	Zip Code
Minneapolis	MN	55438-0901

Purpose of Disbursement
Payment

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

722.92

Transaction ID : VPECRA153E1

c. Hilton Hotel

Mailing Address City Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		07		2015

City	State	Zip Code
Philadelphia	PA	19131

Purpose of Disbursement
Breakfast Meeting

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

670.80

Transaction ID : VPECRA15512

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

2102.47

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 20

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

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NAME OF COMMITTEE (In Full)

Fattah For Congress

Full Name (Last, First, Middle Initial)

A. NGP VAN IncorporatedMailing Address 1101 15th St NW
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement
Software Package

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2015

Amount of Each Disbursement this Period

2715.00

Transaction ID : VPECRA03NV4

B. Royaltan Hotel

Mailing Address 44 W 44th St

City New York State NY Zip Code 10036-6688

Purpose of Disbursement
Business Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		13		2015

Amount of Each Disbursement this Period

1039.85

Transaction ID : VPECRA15538

C. Sun Trust

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement
Transaction Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2015

Amount of Each Disbursement this Period

102.40

Transaction ID : VPECRA15384

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

3857.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 20

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

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NAME OF COMMITTEE (In Full)

Fattah For Congress

Full Name (Last, First, Middle Initial)

A. Sun Trust

Mailing Address PO Box 6600

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2015

City	State	Zip Code
Hagerstown	MD	21741-6600

Amount of Each Disbursement this Period

200.04

Purpose of Disbursement
Transaction Fees**Transaction ID : VPECRA153A0**

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Sun Trust

Mailing Address PO Box 6600

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

City	State	Zip Code
Hagerstown	MD	21741-6600

Amount of Each Disbursement this Period

96.53

Purpose of Disbursement
Transaction Fees**Transaction ID : VPECRA153B7**

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Sunoco Station

Mailing Address 1735 Market St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2015

City	State	Zip Code
Philadelphia	PA	19103-7501

Amount of Each Disbursement this Period

154.82

Purpose of Disbursement
Fuel**Transaction ID : VPECRA049E3**

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

451.39

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 20

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

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NAME OF COMMITTEE (In Full)

Fattah For Congress

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address PO Box 8585

City	State	Zip Code
Philadelphia	PA	19101-8585

Purpose of Disbursement
Wireless Phones

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		26		2015

Amount of Each Disbursement this Period

449.12

Transaction ID : VPECRA15479

B. Verizon

Mailing Address PO Box 8585

City	State	Zip Code
Philadelphia	PA	19101-8585

Purpose of Disbursement
Landline and Fax

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

Amount of Each Disbursement this Period

99.60

Transaction ID : VPECRA153M9

c. Verizon

Mailing Address PO Box 8585

City	State	Zip Code
Philadelphia	PA	19101-8585

Purpose of Disbursement
Landline and Fax

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		27		2015

Amount of Each Disbursement this Period

79.52

Transaction ID : VPECRA153N6

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

628.24

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 20

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

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NAME OF COMMITTEE (In Full)

Fattah For Congress

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address PO Box 8585

City	State	Zip Code
Philadelphia	PA	19101-8585

Purpose of Disbursement
Landline and Fax

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2015

Amount of Each Disbursement this Period

773.40

Transaction ID : VPECRA153P4

B. Verizon

Mailing Address PO Box 8585

City	State	Zip Code
Philadelphia	PA	19101-8585

Purpose of Disbursement
Wireless Phones

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

Amount of Each Disbursement this Period

673.80

Transaction ID : VPECRA153Q2

C.

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

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

773.40

8159.75

SCHEDULE C (FEC Form 3)
LOANS

PAGE 14 OF 20

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFC0B9N9R3L

Fattah For Congress

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

[PERSONAL FUNDS]

Election: 2014

Chaka Fattah

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
PO Box 30743

City

State

ZIP Code

Philadelphia

PA

19104-0743

Original Amount of Loan

3500.00

Cumulative Payment To Date

2000.00

Balance Outstanding at Close of This Period

1500.00

TERMS

Date Incurred

M / D / Y
01 / 23 / 2015

Date Due

M / D / Y
02 / 28 / 2015

Interest Rate

none % (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)..... ►

1500.00

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

PAGE 15 OF 20

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFC0B9N9S0L

Fattah For Congress

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

[PERSONAL FUNDS]

Election: 2014

Chaka Fattah

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
PO Box 30743

City

State

ZIP Code

Philadelphia

PA

19104-0743

Original Amount of Loan

1200.00

Cumulative Payment To Date

1000.00

Balance Outstanding at Close of This Period

200.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
02 / 01 / 2015

Date Due

M M / D D / Y Y Y Y

D D / Y Y Y Y

none

Interest Rate

none

% (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)..... ►

200.00

TOTALS This Period (last page in this line only)..... ►

1700.00

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

PAGE 16 OF 20

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Fattah For Congress

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

Cornerstone Legal Consultants, LLCNature of Debt (Purpose):
Monthly Database Hosting

Mailing Address 4775 League Island Blvd

City State

Zip Code

Philadelphia

PA

19112-1220

Outstanding Balance Beginning This Period

2278.94

Transaction ID : VPCE89H82P1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2278.94

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

Robert Half LegalNature of Debt (Purpose):
Legal Staffing Services

Mailing Address 12400 Collection Center Dr

City State

Zip Code

Chicago

IL

60693-0124

Outstanding Balance Beginning This Period

15114.34

Transaction ID : VPCE89H82Q9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15114.34

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Ross Legal Practice, LLCNature of Debt (Purpose):
Legal FeesMailing Address 1800 John F Kennedy Blvd
Ste 1500

City

State

Zip Code

Philadelphia

PA

19103-7401

Outstanding Balance Beginning This Period

2254.70

Transaction ID : VPCE89H82M5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2254.70

1) **SUBTOTALS** This Period This Page (optional) ▶

19647.98

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) ▶

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +9A-N5HCB
.

Form/Schedule: SD10

Transaction ID : VPCE89H82P1

Quality check, search, convert, bates and produce documents

Form/Schedule: SD10

Transaction ID: VPCE89H82Q9

Staffing Services to review documents

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SD10

Transaction ID : VPCE89H82M5

Reviewing and preparing documents for government review

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 19 OF 20

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Fattah For Congress

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

Weaver & Associates, P.C.

Nature of Debt (Purpose):

Attorney Fees

Mailing Address 1525 Locust St
FI 14

City State

Zip Code

Philadelphia

PA

19102-3718

Outstanding Balance Beginning This Period

-23133.48

Transaction ID : VPCE89H82N3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-23133.48

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

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of 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

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

-23133.48

2) **TOTALS** This Period (last page this line number only)

-3485.50

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)

: 97 `A=G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SD10

Transaction ID : VPCE89H82N3

Legal representation to review documents and provide responses

Form/Schedule:

Transaction ID: