

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

Parrish for Congress

ADDRESS (number and street)

PO Box 1722

Check if different than previously reported. (ACC)

West Chester

PA

19380

2. FEC IDENTIFICATION NUMBER

C C00553990

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

PA

06

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:

X

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

04

26

2016

in the State of

PA

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

01

01

2016

through

04

06

2016

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 William Schoell

Signature of Treasurer

William Schoell

[Electronically Filed]

Date

04

14

2016

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  
**Parrish for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	<input type="text" value="23494.00"/>	<input type="text" value="137806.17"/>
(b) Total Contribution Refunds (from Line 20(d)) .....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	<input type="text" value="23494.00"/>	<input type="text" value="137806.17"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	<input type="text" value="41294.52"/>	<input type="text" value="129858.01"/>
(b) Total Offsets to Operating Expenditures (from Line 14).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	<input type="text" value="41294.52"/>	<input type="text" value="129858.01"/>
8. Cash on Hand at Close of Reporting Period (from Line 27).....	<input type="text" value="15911.07"/>	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="13571.22"/>	

**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

**Parrish for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	15925.00	108275.00
(ii) Unitemized.....	7069.00	29031.17
(iii) TOTAL of contributions from individuals ▶	22994.00	137306.17
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	500.00	500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	23494.00	137806.17
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	6000.00	6000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	6000.00	6000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	29494.00	143806.17

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	41294.52	129858.01
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	41294.52	129858.01

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	27711.59
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	29494.00
25. SUBTOTAL (add Line 23 and Line 24).....	57205.59
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	41294.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	15911.07

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

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

FOR LINE NUMBER: PAGE 5 OF 43  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Keith Charles Wagner**

Mailing Address 13270 Owens Way

City State Zip Code  
Alpharetta GA 30004-7358

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Allianz Global Investors Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VNHXTEB8P90**

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Kevin Eric Walker**

Mailing Address 19 Hunt Club Dr

City State Zip Code  
Honeoye Falls NY 14472-9121

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
AvanGrid Utility Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VNHXTEA0CM0**

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Martin Kuhn**

Mailing Address 4655 Derby Ln

City State Zip Code  
Doylestown PA 18902-9527

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Merck Engineer /Management

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VNHXTECZ5T0**

Amount of Each Receipt this Period

Memo Item

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

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

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

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

FOR LINE NUMBER: PAGE 6 OF 43  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alan R Yockey**

Mailing Address 64 Jolind Rd

City Paoli State PA Zip Code 19301-1153

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2016**

**Transaction ID : VNHXTEBJD41**

Amount of Each Receipt this Period  
**200.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Jackie Parker**

Mailing Address 3 E High St

City Lebanon State PA Zip Code 17042-5455

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

Name of Employer City of Harrisburg Occupation Public Administration

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : VNHXTEBG1C1**

Amount of Each Receipt this Period  
**250.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Douglass Whitehead**

Mailing Address 1352 Sunset View Ln

City Jacksonville State FL Zip Code 32207-7633

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

Name of Employer Republic Services Occupation Manager

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : VNHXTEC0GF1**

Amount of Each Receipt this Period  
**50.00**

Memo Item

**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 7 OF 43  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Russell Phifer**

Mailing Address 125 Rose Ann Ln

City State Zip Code  
West Grove PA 19390-8946

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

Name of Employer Occupation  
WC Environmental Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2016

**Transaction ID : VNHXTE8TSF1**

Amount of Each Receipt this Period  
 100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Douglass Whitehead**

Mailing Address 1352 Sunset View Ln

City State Zip Code  
Jacksonville FL 32207-7633

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

Name of Employer Occupation  
Republic Services Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2016

**Transaction ID : VNHXTE8TTN1**

Amount of Each Receipt this Period  
 100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Rajesh Sahasrabudhe**

Mailing Address 620 Buyers Rd

City State Zip Code  
Collegeville PA 19426-1768

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

Name of Employer Occupation  
Oliver Wyman Actuarial Consulting Actuary

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2016

**Transaction ID : VNHXTE8XCP1**

Amount of Each Receipt this Period  
 250.00

Memo Item

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 43
	<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)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eliot Ingram**

Mailing Address 2107 Brandywine St

City Philadelphia State PA Zip Code 19130-3106

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

Name of Employer Clear Admit Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : VNHXTEBTMY1**

Amount of Each Receipt this Period  
 100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BOBBIE POTSIC**

Mailing Address 1057 Beaumont Rd

City Berwyn State PA Zip Code 19312-2007

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

Name of Employer Retired Occupation Social Worker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **150.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : VNHXTEAKV12**

Amount of Each Receipt this Period  
 100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**William E. Bondinell**

Mailing Address 1512 Franklin Ln

City Chesterbrook State PA Zip Code 19087-1120

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : VNHXTEBVJ33**

Amount of Each Receipt this Period  
 50.00

Memo Item

**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 9 OF 43
	<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)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Russell Phifer**

Mailing Address 125 Rose Ann Ln

City West Grove State PA Zip Code 19390-8946

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

Name of Employer WC Environmental Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : VNHXTE9H653**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Lawrence Henry Frame**

Mailing Address 2020 Grubbs Mill Rd

City Berwyn State PA Zip Code 19312-1932

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

Name of Employer Dept. Of Veterans Affairs Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 11 / 2016

**Transaction ID : VNHXTE8MBF3**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Tom Herman**

Mailing Address 291 Mountz Rd

City Morgantown State PA Zip Code 19543-9385

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

Name of Employer Berks County Democratic Party Occupation Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2016

**Transaction ID : VNHXTEA21F3**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

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

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

\_\_\_\_\_ 600.00

\_\_\_\_\_

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 10 OF 43

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NAME OF COMMITTEE (In Full)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marian Moskowitz**

Mailing Address 1890 Rose Cottage Ln

City Malvern State PA Zip Code 19355-9770

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

Name of Employer Information Requested Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2016

**Transaction ID : VNHXTEBG1G3**

Amount of Each Receipt this Period  
 250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Cynthia Lee Sherbin**

Mailing Address 18 Stoneybrook Ln

City Malvern State PA Zip Code 19355-2931

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

Name of Employer Information Requested Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : VNHXTEA7TG3**

Amount of Each Receipt this Period  
 300.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Jeffrey Eagen**

Mailing Address 314 S Smedley St

City Philadelphia State PA Zip Code 19103-6718

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

Name of Employer Information Requested Occupation consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2016

**Transaction ID : VNHXTEC1YK3**

Amount of Each Receipt this Period  
 250.00

Memo Item

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

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

800.00

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

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

FOR LINE NUMBER: PAGE 11 OF 43  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Peter L. Buttenwieser**

Mailing Address 8325 Saint Martins Ln

City Philadelphia State PA Zip Code 19118-4122

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

Name of Employer Peter Buttenwieser & Assoc. Occupation Education Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 05 / 2016**

**Transaction ID : VNHXTE7S4P3**

Amount of Each Receipt this Period  
**500.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Douglass Whitehead**

Mailing Address 1352 Sunset View Ln

City Jacksonville State FL Zip Code 32207-7633

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

Name of Employer Republic Services Occupation Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 29 / 2016**

**Transaction ID : VNHXTE9H0V3**

Amount of Each Receipt this Period  
**50.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Reid H Blynn**

Mailing Address 857 Lesley Rd

City Villanova State PA Zip Code 19085-1117

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

Name of Employer Newmark Occupation Realtor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : VNHXTEBTMX3**

Amount of Each Receipt this Period  
**50.00**

Memo Item

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

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

**600.00**

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

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

FOR LINE NUMBER: PAGE 12 OF 43  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Craig Stock**

Mailing Address 17 Chestnut Ln

City State Zip Code  
Wayne PA 19087-2604

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2016

**Transaction ID : VNHXTEA0T44**

Amount of Each Receipt this Period  
 250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Montgomery Meigs**

Mailing Address 3810 Bonnell Dr

City State Zip Code  
Austin TX 78731-5820

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : VNHXTEA7F54**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Susan Smith Stedman**

Mailing Address 5 Park Ave

City State Zip Code  
Paoli PA 19301-1133

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : VNHXTEBYD84**

Amount of Each Receipt this Period  
 250.00

Memo Item

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 13 OF 43  
(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)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sam S McKeel**

Mailing Address 1400 Waverly Rd  
Unit V-56

City Gladwyne State PA Zip Code 19035-1200

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

Name of Employer N/A Occupation Retired from Navy

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2016

**Transaction ID : VNHXTECN1Y4**

Amount of Each Receipt this Period  
150.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Jannie Lau**

Mailing Address 132 Trianon Ln

City Villanova State PA Zip Code 19085-1441

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

Name of Employer Interdigital Communications, LLC/LA Occupation Lawyer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 02 / 2016

**Transaction ID : VNHXTE81935**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Raymond Sobieski**

Mailing Address 2353 Butter Rd

City Lancaster State PA Zip Code 17601-5403

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2016

**Transaction ID : VNHXTEA2435**

Amount of Each Receipt this Period  
250.00

Memo Item

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

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

650.00

**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 43
	<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)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Douglass Whitehead**

Mailing Address 1352 Sunset View Ln

City Jacksonville	State FL	Zip Code 32207-7633
----------------------	-------------	------------------------

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

Name of Employer Republic Services	Occupation Manager
---------------------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 10 / 2016

**Transaction ID : VNHXTE8KX55**

Amount of Each Receipt this Period  
50.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Preston Luitweiler**

Mailing Address 752 Mockingbird Ln

City Audubon	State PA	Zip Code 19403-1918
-----------------	-------------	------------------------

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

Name of Employer Retired	Occupation Professional Engineer
-----------------------------	-------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2016

**Transaction ID : VNHXTE85565**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Cynthia O Jimenez**

Mailing Address 932 Franklin St

City Wyomissing	State PA	Zip Code 19610-3003
--------------------	-------------	------------------------

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

Name of Employer N/A	Occupation Not Employed
-------------------------	----------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2016

**Transaction ID : VNHXTEBG1A5**

Amount of Each Receipt this Period  
400.00

Memo Item

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

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

1450.00

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 15 OF 43

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NAME OF COMMITTEE (In Full)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Claudia Silverang**

Mailing Address 242 Waterloo Ave

City State Zip Code  
 Berwyn PA 19312-1739

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

Name of Employer Occupation  
 Silverang Donohoe Rosenzweig Haltzman, Controller

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : VNHXTE9S3F5**

Amount of Each Receipt this Period  
 500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Jason J Schibinger**

Mailing Address 125 Furnace St

City State Zip Code  
 Lebanon PA 17042-9013

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

Name of Employer Occupation  
 Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 25.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 11 / 2016

**Transaction ID : VNHXTE8MBK5**

Amount of Each Receipt this Period  
 25.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Reid H Blynn**

Mailing Address 857 Lesley Rd

City State Zip Code  
 Villanova PA 19085-1117

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

Name of Employer Occupation  
 Newmark Realtor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : VNHXTEAFAX5**

Amount of Each Receipt this Period  
 50.00

Memo Item

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

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

575.00

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 16 OF 43

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NAME OF COMMITTEE (In Full)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan Smith Stedman**

Mailing Address 5 Park Ave

City Paoli State PA Zip Code 19301-1133

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **02 / 29 / 2016**

**Transaction ID : VNHXTE9H4Y5**

Amount of Each Receipt this Period **500.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Daniel F Fee**

Mailing Address 2636 Brown St

City Philadelphia State PA Zip Code 19130-1820

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

Name of Employer The Echo Group Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 28 / 2016**

**Transaction ID : VNHXTEBJ356**

Amount of Each Receipt this Period **250.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**John J Grogan**

Mailing Address 8409 Anderson St

City Philadelphia State PA Zip Code 19118-2801

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

Name of Employer Langer Grogan & Diver PC Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 04 / 2016**

**Transaction ID : VNHXTEA2196**

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).....

**1750.00**



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

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

FOR LINE NUMBER: PAGE 17 OF 43  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Russell Phifer**

Mailing Address 125 Rose Ann Ln

City State Zip Code  
West Grove PA 19390-8946

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

Name of Employer Occupation  
WC Environmental Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2016

**Transaction ID : VNHXTEBKTT6**

Amount of Each Receipt this Period  
 100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Shirley V Nash**

Mailing Address PO Box 348

City State Zip Code  
Chester Springs PA 19425-0348

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 08 / 2016

**Transaction ID : VNHXTEA3DX6**

Amount of Each Receipt this Period  
 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Jonathan David Berger**

Mailing Address 4104 Timber Lane

City State Zip Code  
Philadelphia PA 19129-5526

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

Name of Employer Occupation  
Berger & Montague IT Director

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 13 / 2016

**Transaction ID : VNHXTE75E27**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

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

1100.00

**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 43
	<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)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Lester**

Mailing Address 1310 Cottonwood Valley Cir N

City Irving State TX Zip Code 75038-6200

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

Name of Employer Texas Health Resources Occupation Physician Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1150.00**

Date of Receipt **02 / 18 / 2016**

**Transaction ID : VNHXTE8YE77**

Amount of Each Receipt this Period **250.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BOBBIE POTSIC**

Mailing Address 1057 Beaumont Rd

City Berwyn State PA Zip Code 19312-2007

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

Name of Employer Retired Occupation Social Worker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt **02 / 01 / 2016**

**Transaction ID : VNHXTE7ZE97**

Amount of Each Receipt this Period **50.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Daniel Seltzer**

Mailing Address 1127 Bellview Road Sharpers Run

City Mc Lean State VA Zip Code 22012

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

Name of Employer USI Occupation Risk Management

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt **02 / 24 / 2016**

**Transaction ID : VNHXTE975N7**

Amount of Each Receipt this Period **500.00**

Memo Item

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

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

**800.00**

**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 19 OF 43
	<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)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jason J Schibinger**

Mailing Address 125 Furnace St

City Lebanon State PA Zip Code 17042-9013

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : VNHXTEBG1W7**

Amount of Each Receipt this Period  
**250.00**

Memo Item

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

Mailing Address 815 Wheatfield Ln

City Lebanon State PA Zip Code 17042-6405

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

Name of Employer Information Requested Occupation Information Requested  
**C. L. Sturkey, Inc. President**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : VNHXTEAVZ48**

Amount of Each Receipt this Period  
**300.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**William Phifer**

Mailing Address 1101 Shadow Wood Dr

City Downingtown State PA Zip Code 19335-4050

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

Name of Employer Information Requested Occupation Information Requested  
**Retired retired**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2016**

**Transaction ID : VNHXTEAFB58**

Amount of Each Receipt this Period  
**100.00**

Memo Item

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

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

**650.00**

**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 43
	<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)  
**Parrish for Congress**

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

Mailing Address 9 Harvey Ln

City Malvern State PA Zip Code 19355-2907

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2016

**Transaction ID : VNHXTEBG1J8**

Amount of Each Receipt this Period  
 250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Scott Jenkins**

Mailing Address 24 Meadowood Rd Ste 1410

City Bryn Mawr State PA Zip Code 19010-1052

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

Name of Employer Information Requested Occupation Information Requested  
 S. M. Jenkins & Co. Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 22 / 2016

**Transaction ID : VNHXTE95NM8**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Lani Frank**

Mailing Address 14 Meadow View Ln

City Malvern State PA Zip Code 19355-3364

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

Name of Employer Information Requested Occupation Information Requested  
 Self business owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 03 / 2016

**Transaction ID : VNHXTECZ5V8**

Amount of Each Receipt this Period  
 250.00

Memo Item

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 43
	<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)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BOBBIE POTSIC**

Mailing Address 1057 Beaumont Rd

City State Zip Code  
Berwyn PA 19312-2007

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

Name of Employer Occupation  
Retired Social Worker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 03 / 2016

**Transaction ID : VNHXTEC4TW8**

Amount of Each Receipt this Period  
100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Russell Phifer**

Mailing Address 125 Rose Ann Ln

City State Zip Code  
West Grove PA 19390-8946

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

Name of Employer Occupation  
WC Environmental Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 07 / 2016

**Transaction ID : VNHXTEA0V29**

Amount of Each Receipt this Period  
100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Bayard T Storey**

Mailing Address 1919 Brandywine St

City State Zip Code  
Philadelphia PA 19130-3202

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

Name of Employer Occupation  
retired retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

**Transaction ID : VNHXTEBG189**

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).....

1200.00

**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 43
	<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)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JP Paquin**

Mailing Address 13 Harcourt Rd

City Scarsdale State NY Zip Code 10583-3005

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

Name of Employer Brown Brothers Harriman & Co Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2016**

**Transaction ID : VNHXTEBQ389**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

**1000.00**

**15925.00**

# 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 23 OF 43	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cement Mason 592**

Mailing Address 2843 Snyder Ave

City Philadelphia State PA Zip Code 19145-2429

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : VNHXTECZ301**

Amount of Each Receipt this Period  
**500.00**

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

**500.00**

**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 24 OF 43  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Parrish for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael David Parrish**

Mailing Address 31 Fox Ridge Dr

City Malvern State PA Zip Code 19355-2876

FEC ID number of contributing federal political committee. **C H4PA06052**

Name of Employer Daleco Resources Corporation Occupation CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : VNHXTECGVA1**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Michael David Parrish**

Mailing Address 31 Fox Ridge Dr

City Malvern State PA Zip Code 19355-2876

FEC ID number of contributing federal political committee. **C H4PA06052**

Name of Employer Daleco Resources Corporation Occupation CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : VNHXTECZ2Y5**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

6000.00

6000.00



**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 25 OF 43			
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Campaign Group</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016
Mailing Address 1600 Locust St			Amount of Each Disbursement this Period 5000.00
City Philadelphia	State PA	Zip Code 19103-6305	
Purpose of Disbursement Media Consulting		Candidate Name	Memo Item <input type="checkbox"/>
Category/Type 001			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNGYJA12910
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Google</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016
Mailing Address 1600 Amphitheatre Pkwy			Amount of Each Disbursement this Period 43.47
City Mountain View	State CA	Zip Code 94043-1351	
Purpose of Disbursement Google Apps Service Fee		Candidate Name	Memo Item <input type="checkbox"/>
Category/Type 001			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNGYJA12G40
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Joey Samuel</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2016
Mailing Address 335 E Lancaster Ave Unit D15			Amount of Each Disbursement this Period 1250.00
City Downingtown	State PA	Zip Code 19335-2986	
Purpose of Disbursement Consulting Services		Candidate Name	Memo Item <input type="checkbox"/>
Category/Type 001			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNGYJA12JF0
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6293.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 43	
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016
Mailing Address 937 Paoli Pike		Amount of Each Disbursement this Period 30.51
City West Chester	State PA Zip Code 19380-4527	
Purpose of Disbursement Office Supplies	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : VNGYJA12GH0</b>
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Sage Payment Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016
Mailing Address 12120 Sunset Hills Rd Ste 500		Amount of Each Disbursement this Period 123.32
City Reston	State VA Zip Code 20190-5858	
Purpose of Disbursement Credit Card Processing Fees	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : VNGYJA12G81</b>
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Joey Samuel</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2016
Mailing Address 335 E Lancaster Ave Unit D15		Amount of Each Disbursement this Period 1250.00
City Downingtown	State PA Zip Code 19335-2986	
Purpose of Disbursement Consulting Services	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : VNGYJA12GC1</b>
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1403.83
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 43	
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Authorize.net</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 15.00
City San Francisco	State CA	
Zip Code 94128-8999	Purpose of Disbursement credit Card Processing Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : VNGYJA12HJ1</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ezra Kane-Salafia</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2016
Mailing Address 324 Pennsylvania Ave		Amount of Each Disbursement this Period 350.00
City Kutztown	State PA	
Zip Code 19530-1809	Purpose of Disbursement Consulting Services	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : VNGYJA12PK1</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kennedy Printing</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 5534 Baltimore Ave		Amount of Each Disbursement this Period 945.00
City Philadelphia	State PA	
Zip Code 19143-3106	Purpose of Disbursement Printing - Campaign Literature	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 006	<b>Transaction ID : VNGYJA12SP1</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1310.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 43			
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Google</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 38.54
City Mountain View	State CA Zip Code 94043-1351	
Purpose of Disbursement Google apps Service Fee	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : VNGYJA128Q1</b>
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Hertz Rent A Car</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2016
Mailing Address 1528 Paoli Pike		Amount of Each Disbursement this Period 71.05
City West Chester	State PA Zip Code 19380-6114	
Purpose of Disbursement Car Rental	Category/Type 002	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : VNGYJA12H82</b>
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Google</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 55.00
City Mountain View	State CA Zip Code 94043-1351	
Purpose of Disbursement Google Apps Service Fee	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : VNGYJA12SC2</b>
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	164.59
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 43			
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joey Samuel</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address 335 E Lancaster Ave Unit D15		Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Memo Item
City Downingtown	State PA	
Zip Code 19335-2986	Purpose of Disbursement Consulting Services	Transaction ID : <b>VNGYJA12PE2</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Eddy Foster</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2016
Mailing Address 770 Marlboro Spring Rd		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item
City Kennett Square	State PA	
Zip Code 19348-1345	Purpose of Disbursement Consulting Services	Transaction ID : <b>VNGYJA12903</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Flaster Greenberg P.C.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 1600 John F Kennedy Blvd Ste 200		Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Memo Item
City Philadelphia	State PA	
Zip Code 19103-2813	Purpose of Disbursement Attorney Fees	Transaction ID : <b>VNGYJA12J43</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 43	
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2016
Mailing Address 937 Paoli Pike		Amount of Each Disbursement this Period 180.16
City West Chester	State PA	
Zip Code 19380-4527	Purpose of Disbursement Supplies for fundraising mailing	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 003	<b>Transaction ID : VNGYJA12G73</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cornell Wilson</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2016
Mailing Address 920 Linden St		Amount of Each Disbursement this Period 500.00
City Lebanon	State PA	
Zip Code 17042-5908	Purpose of Disbursement Consulting - Community Organizing	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : VNGYJA12J93</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sage Payment Solutions</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2016
Mailing Address 12120 Sunset Hills Rd Ste 500		Amount of Each Disbursement this Period 218.19
City Reston	State VA	
Zip Code 20190-5858	Purpose of Disbursement Credit Card Processing Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : VNGYJA12HH3</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	898.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 43	
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ezra Kane-Salafia</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 324 Pennsylvania Ave		Amount of Each Disbursement this Period 1100.00
City Kutztown	State PA	
Zip Code 19530-1809	Purpose of Disbursement Consulting Services	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	<b>Transaction ID : VNGYJA12SN3</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sage Payment Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 12120 Sunset Hills Rd Ste 500		Amount of Each Disbursement this Period 419.04
City Reston	State VA	
Zip Code 20190-5858	Purpose of Disbursement Credit Card Processing Fees	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	<b>Transaction ID : VNGYJA12SB4</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Flaster Greenberg P.C.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2016
Mailing Address 1600 John F Kennedy Blvd Ste 200		Amount of Each Disbursement this Period 2500.00
City Philadelphia	State PA	
Zip Code 19103-2813	Purpose of Disbursement Attorney Fees	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	<b>Transaction ID : VNGYJA12J35</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4019.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 43	
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hertz Rent A Car</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 06 / 2016</b>
Mailing Address <b>1528 Paoli Pike</b>		Amount of Each Disbursement this Period <b>105.59</b>
City <b>West Chester</b> State <b>PA</b> Zip Code <b>19380-6114</b>	Purpose of Disbursement <b>Car Rental</b> <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type <b>002</b>	<b>Transaction ID : VNGYJA12S65</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Eddy Foster</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 05 / 2016</b>
Mailing Address <b>770 Marlboro Spring Rd</b>		Amount of Each Disbursement this Period <b>2769.23</b>
City <b>Kennett Square</b> State <b>PA</b> Zip Code <b>19348-1345</b>	Purpose of Disbursement <b>Consulting Services</b> <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : VNGYJA12GB5</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Google</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 03 / 2016</b>
Mailing Address <b>1600 Amphitheatre Pkwy</b>		Amount of Each Disbursement this Period <b>55.00</b>
City <b>Mountain View</b> State <b>CA</b> Zip Code <b>94043-1351</b>	Purpose of Disbursement <b>Google apps Service Fee</b> <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : VNGYJA12GF5</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2929.82</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 43	
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hertz Rent A Car</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2016
Mailing Address 1528 Paoli Pike		Amount of Each Disbursement this Period 31.43
City West Chester	State PA	
Zip Code 19380-6114	Purpose of Disbursement EZ Pass Tolls Billed By Hertz	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	<b>Transaction ID : VNGYJA12HG5</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Max Glass</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2016
Mailing Address N/A		Amount of Each Disbursement this Period 1290.10
City	State	
Zip Code 00000	Purpose of Disbursement Staff Salary	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : VNGYJA0REJ5</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	*
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Joey Samuel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 335 E Lancaster Ave Unit D15		Amount of Each Disbursement this Period 1000.00
City Downingtown	State PA	
Zip Code 19335-2986	Purpose of Disbursement Consulting Services	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : VNGYJA12SM5</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1031.43
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 43	
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Flaster Greenberg P.C.</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 1600 John F Kennedy Blvd Ste 200		Amount of Each Disbursement this Period 5000.00
City Philadelphia	State PA	
Zip Code 19103-2813	Purpose of Disbursement Attorney Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : VNGYJA12SR5</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sage Payment Solutions</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 12120 Sunset Hills Rd Ste 500		Amount of Each Disbursement this Period 751.24
City Reston	State VA	
Zip Code 20190-5858	Purpose of Disbursement Credit Card Processing Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : VNGYJA128T5</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Johnie Fennell</b>		Date of Disbursement MM / DD / YYYY 01 / 21 / 2016
Mailing Address 2010 Bayless Pl		Amount of Each Disbursement this Period 500.00
City Norristown	State PA	
Zip Code 19403-1471	Purpose of Disbursement Consulting Services	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : VNGYJA128Z5</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6251.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 43			
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Heisey's Diner</b>			Date of Disbursement MM / DD / YYYY 02 / 03 / 2016		
Mailing Address 1740 PA 72			Amount of Each Disbursement this Period 222.75		
City Lebanon	State PA	Zip Code 17046	<input type="checkbox"/> Memo Item <b>Transaction ID : VNGYJA12G66</b>		
Purpose of Disbursement Food and Beverage for Meet and Greet		Category/ Type 007			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Authorize.net</b>			Date of Disbursement MM / DD / YYYY 04 / 04 / 2016		
Mailing Address PO Box 8999			Amount of Each Disbursement this Period 15.00		
City San Francisco	State CA	Zip Code 94128-8999	<input type="checkbox"/> Memo Item <b>Transaction ID : VNGYJA12SA6</b>		
Purpose of Disbursement Credit Card Processing Fees		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Joey Samuel</b>			Date of Disbursement MM / DD / YYYY 03 / 14 / 2016		
Mailing Address 335 E Lancaster Ave Unit D15			Amount of Each Disbursement this Period 250.00		
City Downingtown	State PA	Zip Code 19335-2986	<input type="checkbox"/> Memo Item <b>Transaction ID : VNGYJA12PC6</b>		
Purpose of Disbursement Consulting Services		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	487.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 43			
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 02 / 10 / 2016
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 158.10
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Payroll Processing Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : VNGYJA12GA7</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cornell Wilson</b>		Date of Disbursement MM / DD / YYYY 02 / 23 / 2016
Mailing Address 920 Linden St		Amount of Each Disbursement this Period 500.00
City Lebanon	State PA	
Zip Code 17042-5908	Purpose of Disbursement Consulting - Community Organizing	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : VNGYJA12JC7</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Ezra Kane-Salafia</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2016
Mailing Address 324 Pennsylvania Ave		Amount of Each Disbursement this Period 1100.00
City Kutztown	State PA	
Zip Code 19530-1809	Purpose of Disbursement Consulting Services	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : VNGYJA12GE7</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1758.10
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 43			
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ezra Kane-Salafia</b>			Date of Disbursement MM / DD / YYYY 02 / 25 / 2016
Mailing Address 324 Pennsylvania Ave			Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Memo Item
City Kutztown	State PA	Zip Code 19530-1809	
Purpose of Disbursement Consulting Services		Category/ Type 001	<b>Transaction ID : VNGYJA12PG7</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. NGP VAN, Inc.</b>			Date of Disbursement MM / DD / YYYY 03 / 28 / 2016
Mailing Address 1101 15th St NW Ste 500			Amount of Each Disbursement this Period 1612.00 <input type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20005-5006	
Purpose of Disbursement Database		Category/ Type 001	<b>Transaction ID : VNGYJA12HM7</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>			Date of Disbursement MM / DD / YYYY 01 / 25 / 2016
Mailing Address 937 Paoli Pike			Amount of Each Disbursement this Period 73.78 <input type="checkbox"/> Memo Item
City West Chester	State PA	Zip Code 19380-4527	
Purpose of Disbursement Office Supplies		Category/ Type 001	<b>Transaction ID : VNGYJA128S7</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2435.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 43	
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Rittenhouse Political Partners</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2016
Mailing Address 30 S 15th St FI 15		Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Memo Item
City Philadelphia	State PA Zip Code 19102-4826	
Purpose of Disbursement fundraising and Compliance Consulting		Transaction ID : VNGYJA128Y7
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cornell Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016
Mailing Address 920 Linden St		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Memo Item
City Lebanon	State PA Zip Code 17042-5908	
Purpose of Disbursement Consulting - Community Organizing		Transaction ID : VNGYJA12928
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. United States Postal Service (USPS)</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2016
Mailing Address 101 E Gay St		Amount of Each Disbursement this Period 245.00 <input type="checkbox"/> Memo Item
City West Chester	State PA Zip Code 19380-3110	
Purpose of Disbursement Postage		Transaction ID : VNGYJA12GJ8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3745.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 43	
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Authorize.net</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2016
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 15.00
City San Francisco	State CA	
Zip Code 94128-8999	Purpose of Disbursement Credit Card Processing Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : VNGYJA12G99</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Joseph Bachman</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2016
Mailing Address 111 Bethel St		Amount of Each Disbursement this Period 650.00
City Columbia	State PA	
Zip Code 17512-1525	Purpose of Disbursement Consulting Services	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : VNGYJA12GD9</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2016
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 1612.00
City Washington	State DC	
Zip Code 20005-5006	Purpose of Disbursement Database	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : VNGYJA12HK9</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2277.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 43	
	<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)  
**Parrish for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Bachman</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 111 Bethel St		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item
City Columbia	State PA	
Zip Code 17512-1525	Purpose of Disbursement Consulting Services	Transaction ID : <b>VNGYJA12SQ9</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PA Democratic State Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2016
Mailing Address 205 State St		Amount of Each Disbursement this Period 967.00 <input type="checkbox"/> Memo Item
City Harrisburg	State PA	
Zip Code 17101-1130	Purpose of Disbursement Votebuilder DataBasw	Transaction ID : <b>VNGYJA12PR9</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Authorize.net</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2016
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 15.00 <input type="checkbox"/> Memo Item
City San Francisco	State CA	
Zip Code 94128-8999	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : <b>VNGYJA128X9</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1982.00
<b>TOTAL</b> This Period (last page this line number only).....	40737.40



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Parrish for Congress** Transaction ID : **VNHXTECGVA1L**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  Memo Item Election: 2016  
**Michael David Parrish**  Primary  
 Mailing Address 31 Fox Ridge Dr General  
 Other (specify) ▼

City Malvern State PA ZIP Code 19355-2876

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

**TERMS** Date Incurred Date Due Interest Rate Secured:  
 M 03 / D 28 / Y 2016 M M / D D / Y none % (apr)  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)..... ▶ 5000.00  
**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**

NAME OF COMMITTEE (In Full) **Parrish for Congress** Transaction ID : **VNHXTECZ2Y5L**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **PERSONAL FUNDS**  Memo Item  
**Michael David Parrish**

Election: 2016  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 31 Fox Ridge Dr

City State ZIP Code  
 Malvern PA 19355-2876

Original Amount of Loan 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000.00
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred: M 03 / D 31 / Y 2016  
 Date Due: M / D / 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	1000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	6000.00

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)

**Parrish for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Grand Central Consulting</b>		Nature of Debt (Purpose): Consultant - Research
Mailing Address PO Box 45		
City	State	Zip Code
Harrison	NY	10528-0045

Outstanding Balance Beginning This Period	Transaction ID : VNF029H9ST5	
1321.22		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1321.22

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Grand Central Consulting</b>		Nature of Debt (Purpose): Consultant - Research
Mailing Address PO Box 45		
City	State	Zip Code
Harrison	NY	10528-0045

Outstanding Balance Beginning This Period	Transaction ID : VNF029H9SS7	
6250.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	6250.00

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) <b>SUBTOTALS</b> This Period This Page (optional) .....	7571.22
2) <b>TOTALS</b> This Period (last page this line number only) .....	7571.22
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	6000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	13571.22