

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Aramark Services, Inc. PAC (Aramark PAC)

ADDRESS (number and street) 1101 Market Street Philadelphia PA 19107 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00157677 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 11 / 25 / 2014 through 12 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Stephen R. Reynolds

Signature of Treasurer Stephen R. Reynolds [Electronically Filed] Date 01 / 09 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Aramark Services, Inc. PAC (Aramark PAC)**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value=""/>	<input type="text" value="93969.28"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="100988.06"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1202.00"/>	<input type="text" value="12646.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="102190.06"/>	<input type="text" value="106615.28"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25.68"/>	<input type="text" value="4450.90"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="102164.38"/>	<input type="text" value="102164.38"/>
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="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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

Write or Type Committee Name

**Aramark Services, Inc. PAC (Aramark PAC)**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	635.00	3910.00
(ii) Unitemized .....	567.00	8736.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1202.00	12646.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1202.00	12646.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	1202.00	12646.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1202.00	12646.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	25.68	330.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	25.68	330.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	3500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	120.00
(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 28(a), (b), and (c)).....	0.00	120.00
29. Other Disbursements .....	0.00	500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	25.68	4450.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25.68	4450.90

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1202.00	12646.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	120.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1202.00	12526.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	25.68	330.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	25.68	330.90

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)  
**Aramark Services, Inc. PAC (Aramark PAC)**

**A. Harry J. Carpenter**  
Full Name (Last, First, Middle Initial)

Mailing Address 156 Barton Dr

City Spring City	State PA	Zip Code 19475-3418
---------------------	-------------	------------------------

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

Name of Employer ARAMARK	Occupation Vice President, Finance, Education
-----------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2014

**Transaction ID : ECB0BD3748234FEAA615**

Amount of Each Receipt this Period  

25.00
-------

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

Mailing Address 156 Barton Dr

City Spring City	State PA	Zip Code 19475-3418
---------------------	-------------	------------------------

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

Name of Employer ARAMARK	Occupation Vice President, Finance, Education
-----------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  

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

**Transaction ID : 957F2EE493C04964A1B6**

Amount of Each Receipt this Period  

25.00
-------

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

Mailing Address 156 Barton Dr

City Spring City	State PA	Zip Code 19475-3418
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FEC ID number of contributing federal political committee. **C**

Name of Employer ARAMARK	Occupation Vice President, Finance, Education
-----------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2014

**Transaction ID : 9A38B3BEE7AB41A08EC4**

Amount of Each Receipt this Period  

25.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>75.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 19
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Aramark Services, Inc. PAC (Aramark PAC)**

**A. Jeffrey P. Connor**  
Full Name (Last, First, Middle Initial)

Mailing Address 1544 Fargo Blvd

City Geneva	State IL	Zip Code 60134-2977
----------------	-------------	------------------------

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

Name of Employer ARAMARK	Occupation Sales Vice President (Elc)
-----------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2014

**Transaction ID : E36A6FFA326E41C082B5**

Amount of Each Receipt this Period  

25.00
-------

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

Mailing Address 1544 Fargo Blvd

City Geneva	State IL	Zip Code 60134-2977
----------------	-------------	------------------------

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

Name of Employer ARAMARK	Occupation Sales Vice President (Elc)
-----------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  

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

**Transaction ID : DE7FDDC2E4BC4FFAABA**

Amount of Each Receipt this Period  

25.00
-------

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

Mailing Address 1544 Fargo Blvd

City Geneva	State IL	Zip Code 60134-2977
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FEC ID number of contributing federal political committee. **C**

Name of Employer ARAMARK	Occupation Sales Vice President (Elc)
-----------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2014

**Transaction ID : 6561AE7CC6704E6D858C**

Amount of Each Receipt this Period  

25.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>75.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Aramark Services, Inc. PAC (Aramark PAC)**

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

Mailing Address 450 Westminster Ave

City Haddonfield State NJ Zip Code 08033-4019

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

Name of Employer ARAMARK Occupation EXECUTIVE VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 28 / 2014**

**Transaction ID : B9A465C4946C42E9947B**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 450 Westminster Ave

City Haddonfield State NJ Zip Code 08033-4019

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

Name of Employer ARAMARK Occupation EXECUTIVE VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

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

**Transaction ID : 34285753DA264487B5A0**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 450 Westminster Ave

City Haddonfield State NJ Zip Code 08033-4019

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

Name of Employer ARAMARK Occupation EXECUTIVE VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 26 / 2014**

**Transaction ID : CC9F04831DAC4A918084**

Amount of Each Receipt this Period  
**25.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **75.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 19
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Aramark Services, Inc. PAC (Aramark PAC)**

**A. THERESA J ELLSLER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4 Castle View Dr  
City Mc Kees Rocks State PA Zip Code 15136-1892  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ARAMARK Occupation DISTRICT MANAGER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 05 / 2014  
**Transaction ID : 89493380B8EB48549D92**  
Amount of Each Receipt this Period 10.00

**B. THERESA J ELLSLER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4 Castle View Dr  
City Mc Kees Rocks State PA Zip Code 15136-1892  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ARAMARK Occupation DISTRICT MANAGER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2014  
**Transaction ID : F9E3ED19783A473EBD8B**  
Amount of Each Receipt this Period 10.00

**C. JAMES A HINDS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 39W894 LOUISA MAY  
City ST. CHARLES State IL Zip Code 60175  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ARAMARK Occupation REGIONAL VICE PRESIDENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 675.00

Date of Receipt 12 / 05 / 2014  
**Transaction ID : F4C9CD71EF0F4C278DC5**  
Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Aramark Services, Inc. PAC (Aramark PAC)**

**A. JAMES A HINDS**  
Full Name (Last, First, Middle Initial)

Mailing Address 39W894 LOUISA MAY

City ST. CHARLES State IL Zip Code 60175

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

Name of Employer ARAMARK Occupation REGIONAL VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**12 / 19 / 2014**

**Transaction ID : D12AB1F3FA184316AD78**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 105 Bedford St

City Burlington State MA Zip Code 01803-2854

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

Name of Employer ARAMARK Occupation GENERAL MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**11 / 28 / 2014**

**Transaction ID : 4C4C0579F235453DB7DC**

Amount of Each Receipt this Period  
**5.00**

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

Mailing Address 105 Bedford St

City Burlington State MA Zip Code 01803-2854

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

Name of Employer ARAMARK Occupation GENERAL MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

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

**Transaction ID : 50A7FF11B96141D68BC8**

Amount of Each Receipt this Period  
**5.00**

**SUBTOTAL** of Receipts This Page (optional)..... **35.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 19
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Aramark Services, Inc. PAC (Aramark PAC)**

**A. JOHN LYONS**  
Full Name (Last, First, Middle Initial)

Mailing Address 105 Bedford St

City Burlington	State MA	Zip Code 01803-2854
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FEC ID number of contributing federal political committee. **C**

Name of Employer ARAMARK	Occupation GENERAL MANAGER
-----------------------------	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

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

**Transaction ID : 7C49299EDEC84F5D8D26**

Amount of Each Receipt this Period  
5.00

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

Mailing Address 105 Bedford St

City Burlington	State MA	Zip Code 01803-2854
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FEC ID number of contributing federal political committee. **C**

Name of Employer ARAMARK	Occupation GENERAL MANAGER
-----------------------------	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2014

**Transaction ID : 039A09087E4F4E14A4D3**

Amount of Each Receipt this Period  
5.00

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

Mailing Address 105 Bedford St

City Burlington	State MA	Zip Code 01803-2854
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FEC ID number of contributing federal political committee. **C**

Name of Employer ARAMARK	Occupation GENERAL MANAGER
-----------------------------	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2014

**Transaction ID : 2208FD51248143038689**

Amount of Each Receipt this Period  
5.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Aramark Services, Inc. PAC (Aramark PAC)**

**A. MICHAEL MALTESE**  
Full Name (Last, First, Middle Initial)

Mailing Address 3104 Sunningdale Ct

City Lexington State KY Zip Code 40509-8516

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

Name of Employer ARAMARK Occupation RESIDENT DISTRICT MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 28 / 2014

**Transaction ID : D8A0E5CC41E74AE085A2**

Amount of Each Receipt this Period  
 15.00

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

Mailing Address 3104 Sunningdale Ct

City Lexington State KY Zip Code 40509-8516

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

Name of Employer ARAMARK Occupation RESIDENT DISTRICT MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

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

**Transaction ID : D95920BCEB0344BF8F99**

Amount of Each Receipt this Period  
 15.00

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

Mailing Address 3104 Sunningdale Ct

City Lexington State KY Zip Code 40509-8516

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

Name of Employer ARAMARK Occupation RESIDENT DISTRICT MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2014

**Transaction ID : 3A8100E68DB143869855**

Amount of Each Receipt this Period  
 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Aramark Services, Inc. PAC (Aramark PAC)**

**A. DENISE M O'BRIEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 67 Katie Dr

City Langhorne State PA Zip Code 19047-2335

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

Name of Employer ARAMARK Occupation VP, BUS. DEVELOPMENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
11 / 28 / 2014  
**Transaction ID : 8BA807E2880C4777B74A**

Amount of Each Receipt this Period  
15.00

**B. DENISE M O'BRIEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 67 Katie Dr

City Langhorne State PA Zip Code 19047-2335

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

Name of Employer ARAMARK Occupation VP, BUS. DEVELOPMENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
12 / 12 / 2014  
**Transaction ID : 2FFB470980B1459DB2B8**

Amount of Each Receipt this Period  
15.00

**C. DENISE M O'BRIEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 67 Katie Dr

City Langhorne State PA Zip Code 19047-2335

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

Name of Employer ARAMARK Occupation VP, BUS. DEVELOPMENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
12 / 26 / 2014  
**Transaction ID : A42A4732C47242828668**

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Aramark Services, Inc. PAC (Aramark PAC)**

**A. Daniel Regan**  
Full Name (Last, First, Middle Initial)

Mailing Address 2033 Lake Marshall Dr

City Gibsonia State PA Zip Code 15044-7426

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

Name of Employer ARAMARK Occupation Regional Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **11 / 28 / 2014**

**Transaction ID : 31704C91417F458FB5CD**

Amount of Each Receipt this Period **15.00**

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

Mailing Address 2033 Lake Marshall Dr

City Gibsonia State PA Zip Code 15044-7426

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

Name of Employer ARAMARK Occupation Regional Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **12 / 12 / 2014**

**Transaction ID : 4C1EBB7896A547B58BAB**

Amount of Each Receipt this Period **15.00**

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

Mailing Address 2033 Lake Marshall Dr

City Gibsonia State PA Zip Code 15044-7426

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

Name of Employer ARAMARK Occupation Regional Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **12 / 26 / 2014**

**Transaction ID : 1C20FCA448D34F5986D0**

Amount of Each Receipt this Period **15.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **45.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Aramark Services, Inc. PAC (Aramark PAC)**

**A. RICHARD ROPER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 Towne Hill Rd

City Bradford State MA Zip Code 01835-8279

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

Name of Employer ARAMARK Occupation REGIONAL VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 11 / 28 / 2014  
**Transaction ID : 32F8138CE56D42309E8E**

Amount of Each Receipt this Period 15.00

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

Mailing Address 2 Towne Hill Rd

City Bradford State MA Zip Code 01835-8279

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

Name of Employer ARAMARK Occupation REGIONAL VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 12 / 05 / 2014  
**Transaction ID : 6BC8EA4BF7E84960BCC4**

Amount of Each Receipt this Period 15.00

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

Mailing Address 2 Towne Hill Rd

City Bradford State MA Zip Code 01835-8279

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

Name of Employer ARAMARK Occupation REGIONAL VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 12 / 12 / 2014  
**Transaction ID : 09A04EA96BDD4855949D**

Amount of Each Receipt this Period 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Aramark Services, Inc. PAC (Aramark PAC)**

Full Name (Last, First, Middle Initial) <b>A. RICHARD ROPER</b>		Date of Receipt 12 / 19 / 2014 <b>Transaction ID : 5B585FF3A8564074A40E</b>
Mailing Address 2 Towne Hill Rd		Amount of Each Receipt this Period 15.00
City Bradford	State MA	Zip Code 01835-8279
FEC ID number of contributing federal political committee. C	Name of Employer ARAMARK	Occupation REGIONAL VICE PRESIDENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

Full Name (Last, First, Middle Initial) <b>B. RICHARD ROPER</b>		Date of Receipt 12 / 26 / 2014 <b>Transaction ID : 976EAD298E4F4370B666</b>
Mailing Address 2 Towne Hill Rd		Amount of Each Receipt this Period 15.00
City Bradford	State MA	Zip Code 01835-8279
FEC ID number of contributing federal political committee. C	Name of Employer ARAMARK	Occupation REGIONAL VICE PRESIDENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

Full Name (Last, First, Middle Initial) <b>C. TRACY TOMKIEWICZ</b>		Date of Receipt 12 / 05 / 2014 <b>Transaction ID : 6A10C11D107A4A3EB878</b>
Mailing Address 1819 Klaehn Ct		Amount of Each Receipt this Period 15.00
City Fort Wayne	State IN	Zip Code 46804-3850
FEC ID number of contributing federal political committee. C	Name of Employer ARAMARK	Occupation OPERATIONS VP (NON ELC)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Aramark Services, Inc. PAC (Aramark PAC)**

**A. TRACY TOMKIEWICZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 1819 Klaehn Ct

City Fort Wayne State IN Zip Code 46804-3850

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

Name of Employer ARAMARK Occupation OPERATIONS VP (NON ELC)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 19 / 2014**

**Transaction ID : 57C7939EC340434A9429**

Amount of Each Receipt this Period  
**15.00**

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

Mailing Address 802 Moss Creek Plantation

City Duluth State GA Zip Code 30097-5958

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

Name of Employer ARAMARK Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 28 / 2014**

**Transaction ID : E2ABA351B57D4910A651**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 802 Moss Creek Plantation

City Duluth State GA Zip Code 30097-5958

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

Name of Employer ARAMARK Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

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

**Transaction ID : E537C10D8A914BA5A343**

Amount of Each Receipt this Period  
**25.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>65.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 18 OF 19  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Aramark Services, Inc. PAC (Aramark PAC)**

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

Mailing Address 802 Moss Creek Plantation

City Duluth State GA Zip Code 30097-5958

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

Name of Employer ARAMARK Occupation Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 26 / 2014**

**Transaction ID : B826480E289149A09F69**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>25.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>635.00</b>

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Aramark Services, Inc. PAC (Aramark PAC)**

Full Name (Last, First, Middle Initial)

**A. Wells Fargo**

Mailing Address P.O. Box 6995

City Portland State OR Zip Code 97228-6995

Purpose of Disbursement  
Bank Fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : 18EA9A59AF2DB94D366

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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