

# 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

Dee Adcock for Congress

ADDRESS (number and street)

2629 Philmont Avenue

Check if different than previously reported. (ACC)

Huntingdon Valley

PA

19006-5301

2. FEC IDENTIFICATION NUMBER ▼

C C00557389

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

PA

13

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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

Type or Print Name of Treasurer Linda Dexter

Signature of Treasurer Linda Dexter

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Dee Adcock for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 05 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	30569.99	70666.39
(b) Total Contribution Refunds (from Line 20(d)) .....	0	50
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	30569.99	70616.39
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	233829.28	283104.93
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	233829.28	283104.93
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	15071.46	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	230000	

**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

**Dee Adcock 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).....	24200	62622.4
(ii) Unitemized.....	6369.99	8043.99
(iii) TOTAL of contributions from individuals ▶	30569.99	70666.39
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	30569.99	70666.39
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	0
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	118000	230000
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	118000	230000
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0	0
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0	0
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	148569.99	300666.39

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	233829.28	283104.93
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	50
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	50
21. OTHER DISBURSEMENTS .....	1330	2440
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	235159.28	285594.93

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	101660.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	148569.99
25. SUBTOTAL (add Line 23 and Line 24).....	250230.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	235159.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	15071.46

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 46
	<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	

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)  
**Dee Adcock for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Samuel Edmon Flemmons Jr**

Mailing Address 8361 Briar Creek Drive

City Germantown	State TN	Zip Code 38139-6303
--------------------	-------------	------------------------

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

Name of Employer Pool Contractors Supply	Occupation CEO
---	-------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

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

**Transaction ID : A-CF158**

Amount of Each Receipt this Period  
250

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

Mailing Address 8361 Briar Creek Drive

City Germantown	State TN	Zip Code 38139-6303
--------------------	-------------	------------------------

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

Name of Employer Renaissance RX	Occupation Pharmacist
------------------------------------	--------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

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

**Transaction ID : A-CF159**

Amount of Each Receipt this Period  
250

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

Mailing Address PO Box 120

City Huntingdon Valley	State PA	Zip Code 19006-0120
---------------------------	-------------	------------------------

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

Name of Employer John Kennedy Auto	Occupation Auto Dealer
---------------------------------------	---------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

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

**Transaction ID : A-CF184**

Amount of Each Receipt this Period  
2600

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

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

3100.00

**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 6 OF 46
	<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)  
**Dee Adcock for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lydia Kennedy**

Mailing Address PO Box 120

City: Huntingdon Valley State: PA Zip Code: 19006-0120

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

Name of Employer: Homemaker Occupation: Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **2600**

Date of Receipt: **05 / 13 / 2014**

**Transaction ID : A-CF185**

Amount of Each Receipt this Period: **2600**

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

Mailing Address 2713 Barry Lane

City: Huntingdon Valley State: PA Zip Code: 19006-5411

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

Name of Employer: N/A Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **300**

Date of Receipt: **05 / 15 / 2014**

**Transaction ID : A-CF191**

Amount of Each Receipt this Period: **300**

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

Mailing Address 2626 Philmont Avenue

City: Huntingdon Valley State: PA Zip Code: 19006-5302

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

Name of Employer: W W Adcock Inc Occupation: Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **5200**

Date of Receipt: **05 / 16 / 2014**

**Transaction ID : A-CF207**

Amount of Each Receipt this Period: **2600**

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

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

**5500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 46
	<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)  
**Dee Adcock for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Elizabeth L Christian**

Mailing Address 1830 Canterbury Road

City Abington State PA Zip Code 19001-4524

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : A-CF206**

Amount of Each Receipt this Period  
**2600**

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

Mailing Address 1830 Canterbury Road

City Abington State PA Zip Code 19001-4524

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

Name of Employer Kreischer Miller Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : A-CF205**

Amount of Each Receipt this Period  
**2600**

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

Mailing Address 1714 Brook Road

City Rydal State PA Zip Code 19046-1462

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

Name of Employer Brown Shoe Company Occupation Supply Chain

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

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

**Transaction ID : A-CF229**

Amount of Each Receipt this Period  
**2000**

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

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

**7200.00**

**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 46
	<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)  
**Dee Adcock for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carson A Adcock**

Mailing Address PO Box 492

City: Huntingdon Valley State: PA Zip Code: 19006-0492

FEC ID number of contributing federal political committee: C

Name of Employer: W W Adcock Inc Occupation: Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2000

Date of Receipt: 05 / 19 / 2014

**Transaction ID : A-CF231**

Amount of Each Receipt this Period: 2000

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

Mailing Address 1714 Brook Road

City: Rydal State: PA Zip Code: 19046-1462

FEC ID number of contributing federal political committee: C

Name of Employer: N/A Occupation: Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2000

Date of Receipt: 05 / 19 / 2014

**Transaction ID : A-CF232**

Amount of Each Receipt this Period: 2000

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

Mailing Address PO Box 491

City: Bryn Athyn State: PA Zip Code: 19009-0491

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250

Date of Receipt: 05 / 19 / 2014

**Transaction ID : A-CF252**

Amount of Each Receipt this Period: 250

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

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

4250.00



**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 46
	<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)  
**Dee Adcock for Congress**

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

Mailing Address **PO Box 266**

City **Bryn Athyn** State **PA** Zip Code **19009-0266**

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

Name of Employer **Self** Occupation **CPA**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

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

**Transaction ID : A-CF239**

Amount of Each Receipt this Period  
**300**

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

Mailing Address **1164 Wheatsheaf Lane**

City **Abington** State **PA** Zip Code **19001-3616**

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

Name of Employer **Self** Occupation **Free Lance Writer/Editor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 28 / 2014**

**Transaction ID : A-CF306**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address **PO Box 276**

City **Bryn Athyn** State **PA** Zip Code **19009-0276**

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

Name of Employer **U S Airways** Occupation **Pilot**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : A-CF324**

Amount of Each Receipt this Period  
**250**

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

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

**1550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 46
	<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)  
**Dee Adcock for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Coulston S Henry**

Mailing Address 1626 Amity Road

City Rydal State PA Zip Code 19046-1205

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

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

**Transaction ID : A-CF367**

Amount of Each Receipt this Period  
**2600**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**2600.00**

**24200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 46
<input type="checkbox"/> 11a 12	<input checked="" 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)  
**Dee Adcock for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carson Dee Adcock**

Mailing Address 1714 Brook Road

City Jenkintown State PA Zip Code 19046-1462

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

Name of Employer W W Adcock Inc Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 22 / 2014**

**Transaction ID : A-LL5**

Amount of Each Receipt this Period  
**75000**

Loan from Personal Funds

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

Mailing Address 1714 Brook Road

City Jenkintown State PA Zip Code 19046-1462

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

Name of Employer W W Adcock Inc Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230000**

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

**Transaction ID : A-LL6**

Amount of Each Receipt this Period  
**28000**

Loan from Personal Funds

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

Mailing Address 1714 Brook Road

City Jenkintown State PA Zip Code 19046-1462

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

Name of Employer W W Adcock Inc Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : A-LL7**

Amount of Each Receipt this Period  
**15000**

Loan from Personal Funds

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

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

**118000.00**

**118000.00**

**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 12 OF 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mayfair Business Association</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 3530 Cottman Avenue		Amount of Each Disbursement this Period 320 <b>Transaction ID : B-E-144</b>
City Phila	State PA Zip Code 19149-1606	
Purpose of Disbursement Administrative/Salary/Overhead: Sponsor		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. RCR Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 55 Beacon Hill Lane		Amount of Each Disbursement this Period 16278 <b>Transaction ID : B-E-137</b>
City Phoenixville	State PA Zip Code 19460-2712	
Purpose of Disbursement Direct Mail Expense		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RCR Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 55 Beacon Hill Lane		Amount of Each Disbursement this Period 2500 <b>Transaction ID : B-E-143</b>
City Phoenixville	State PA Zip Code 19460-2712	
Purpose of Disbursement Political Strategy Consulting		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	19098.00
<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 13 OF 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 830 Welsh Road		Amount of Each Disbursement this Period 19.6 <b>Transaction ID : B-E-146</b>
City Huntingdon Valley	State PA	
Zip Code 19006-6015	Purpose of Disbursement Administrative/Salary/Overhead: Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Capitol Promotions Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address PO Box 231		Amount of Each Disbursement this Period 4541.04 <b>Transaction ID : B-E-152</b>
City Glenside	State PA	
Zip Code 19038-0231	Purpose of Disbursement Paraphernalia: Yard Signs	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 14.95 <b>Transaction ID : B-E-151</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Credit Card Discount Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4575.59
<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 14 OF 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. RCR Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 55 Beacon Hill Lane		Amount of Each Disbursement this Period 1596 <b>Transaction ID : B-E-153</b>
City Phoenixville	State PA	
Zip Code 19460-2712	Purpose of Disbursement Paraphernalia: Ballot Handouts	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. RCR Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 55 Beacon Hill Lane		Amount of Each Disbursement this Period 10295.5 <b>Transaction ID : B-E-154</b>
City Phoenixville	State PA	
Zip Code 19460-2712	Purpose of Disbursement Advertising: Radio Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 5 <b>Transaction ID : B-E-166</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Credit Card Discount Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11896.50
<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 15 OF 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 93 E Street Road		Amount of Each Disbursement this Period 94.32 <b>Transaction ID : B-E-178</b>
City Feasterville Treose	State PA Zip Code 19053-6047	
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Carol Lux</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 506 Gravel Hill Station		Amount of Each Disbursement this Period 10.14 <b>Transaction ID : B-E-171</b>
City Southampton	State PA Zip Code 18966-4194	
Purpose of Disbursement Reimburse Meals	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Political Persuasion LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1901 John F Kennedy Boulevard Apt. 2709		Amount of Each Disbursement this Period 750 <b>Transaction ID : B-E-172</b>
City Phila	State PA Zip Code 19103-1523	
Purpose of Disbursement Political Strategy Consulting	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	854.46
<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 16 OF 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. RCR Inc</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 55 Beacon Hill Lane		Amount of Each Disbursement this Period 850 <b>Transaction ID : B-E-173</b>
City Phoenixville	State PA	
Zip Code 19460-2712	Purpose of Disbursement Advertising: Media Production	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. RCR Inc</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 55 Beacon Hill Lane		Amount of Each Disbursement this Period 930 <b>Transaction ID : B-E-174</b>
City Phoenixville	State PA	
Zip Code 19460-2712	Purpose of Disbursement Advertising: Media Production	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo Payroll Serices</b>		Date of Disbursement MM / DD / YYYY 05 / 09 / 2014
Mailing Address 401 S Tryon Street		Amount of Each Disbursement this Period 231.12 <b>Transaction ID : B-E-169</b>
City Charlotte	State NC	
Zip Code 28202-1911	Purpose of Disbursement Employer Payroll Taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2011.12
<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 17 OF 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo Payroll Serices</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 401 S Tryon Street		Amount of Each Disbursement this Period 60 <b>Transaction ID : B-E-170</b>
City Charlotte	State NC	
Zip Code 28202-1911	Purpose of Disbursement Payroll Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ryan Capone</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 2046 Parkview Avenue		Amount of Each Disbursement this Period 1200 <b>Transaction ID : B-E-168</b>
City Abington	State PA	
Zip Code 19001-1222	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Carol Lux</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 506 Gravel Hill Station		Amount of Each Disbursement this Period 737.5 <b>Transaction ID : B-E-167</b>
City Southampton	State PA	
Zip Code 18966-4194	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1997.50
<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 18 OF 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nation Builder</b>		Date of Disbursement MM / DD / YYYY 05 / 12 / 2014
Mailing Address 448 S Hill Street		Amount of Each Disbursement this Period 499 <b>Transaction ID : B-E-179</b>
City Los Angeles	State CA	
Zip Code 90013-1155	Purpose of Disbursement Website Hosting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Carson Dee Adcock</b>		Date of Disbursement MM / DD / YYYY 05 / 13 / 2014
Mailing Address 1714 Brook Road		Amount of Each Disbursement this Period 184.09 <b>Transaction ID : B-E-183</b>
City Jenkintown	State PA	
Zip Code 19046-1462	Purpose of Disbursement Reimburse Meals	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>c. Cheesecake Factory</b>		Date of Disbursement MM / DD / YYYY 05 / 13 / 2014
Mailing Address 2500 W Moreland Road		Amount of Each Disbursement this Period 27.81 <b>Transaction ID : B-S-7</b>
City Willow Grove	State PA	
Zip Code 19090-4002	Purpose of Disbursement Meals	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b> Subitemization of Carson Dee Adcock(05/13/14)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	683.09
<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 19 OF 46
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial)

**A. Complete Campaigns**

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Credit Card Discount

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
5

Transaction ID : B-E-219

Category/Type: 001

Full Name (Last, First, Middle Initial)

**B. Complete Campaigns**

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Software Support

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
650

Transaction ID : B-E-223

Category/Type: 001

Full Name (Last, First, Middle Initial)

**c. Target**

Mailing Address 1495 Old York Road

City Abington State PA Zip Code 19001-1923

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
56.64

Transaction ID : B-E-224

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 711.64

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo Payroll Serices</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 401 S Tryon Street		Amount of Each Disbursement this Period 389.21
City Charlotte	State NC	
Zip Code 28202-1911	Purpose of Disbursement Employer Payroll Tax	<b>Transaction ID : B-E-289</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2014
Mailing Address 93 E Street Road		Amount of Each Disbursement this Period 3.18
City Feasterville Trevoese	State PA	
Zip Code 19053-6047	Purpose of Disbursement Office Supplies	<b>Transaction ID : B-E-287</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Cheesecake Factory</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2014
Mailing Address 2500 W Moreland Road		Amount of Each Disbursement this Period 133.86
City Willow Grove	State PA	
Zip Code 19090-4002	Purpose of Disbursement Administrative/Salary/Overhead: Meal	<b>Transaction ID : B-E-283</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	526.25
<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 21 OF 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 93 E Street Road		Amount of Each Disbursement this Period 40.68 <b>Transaction ID : B-E-282</b>
City Feasterville Treose	State PA Zip Code 19053-6047	
Purpose of Disbursement Office Supplies	001	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1.25 <b>Transaction ID : B-E-255</b>
City Washington	State DC Zip Code 20003-1164	
Purpose of Disbursement Credit Card Discount Fee	001	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAETEC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address PO Box 9001111		Amount of Each Disbursement this Period 386.99 <b>Transaction ID : B-E-262</b>
City Louisville	State KY Zip Code 40290-1111	
Purpose of Disbursement Telephone	001	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	428.92
<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 22 OF 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. RCR Inc</b>		Date of Disbursement MM / DD / YYYY 05 / 20 / 2014
Mailing Address 55 Beacon Hill Lane		Amount of Each Disbursement this Period 400 <b>Transaction ID : B-E-242</b>
City Phoenixville	State PA	
Zip Code 19460-2712	Purpose of Disbursement Advertising: Media Production	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Travis Hill</b>		Date of Disbursement MM / DD / YYYY 05 / 20 / 2014
Mailing Address 824 Meadowbrook Drive		Amount of Each Disbursement this Period 69.78 <b>Transaction ID : B-E-241</b>
City Huntingdon Valley	State PA	
Zip Code 19006-6930	Purpose of Disbursement Travel: Mileage Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 78.77 <b>Transaction ID : B-E-290</b>
City Menlo Park	State CA	
Zip Code 94025-1452	Purpose of Disbursement Advertising: Advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	548.55
<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 23 OF 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Comcast Cable</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address PO Box 3005		Amount of Each Disbursement this Period 159.9 <b>Transaction ID : B-E-263</b>
City Southeastern	State PA	
Zip Code 19398-3005	Purpose of Disbursement Administrative/Salary/Overhead: Internet	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Campaign Grid LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 414 Commerce Drive Suite 100		Amount of Each Disbursement this Period 15000 <b>Transaction ID : B-E-271</b>
City Fort Washington	State PA	
Zip Code 19034-2620	Purpose of Disbursement Advertising: Advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 5 <b>Transaction ID : B-E-270</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Credit Card Discount Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15164.90
<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 24 OF 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. RCR Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 55 Beacon Hill Lane		Amount of Each Disbursement this Period 125000 <b>Transaction ID : B-E-272</b>
City Phoenixville	State PA	
Zip Code 19460-2712	Purpose of Disbursement Advertising: Media Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo Payroll Serices</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 401 S Tryon Street		Amount of Each Disbursement this Period 409.37 <b>Transaction ID : B-E-245</b>
City Charlotte	State NC	
Zip Code 28202-1911	Purpose of Disbursement Employer Payroll Tax	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo Payroll Serices</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 401 S Tryon Street		Amount of Each Disbursement this Period 60 <b>Transaction ID : B-E-246</b>
City Charlotte	State NC	
Zip Code 28202-1911	Purpose of Disbursement Payroll Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	125469.37
<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 25 OF 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ryan Capone</b>		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 2046 Parkview Avenue		Amount of Each Disbursement this Period 1200 <b>Transaction ID : B-E-244</b>
City Abington	State PA Zip Code 19001-1222	
Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Carol Lux</b>		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 506 Gravel Hill Station		Amount of Each Disbursement this Period 881.25 <b>Transaction ID : B-E-243</b>
City Southampton	State PA Zip Code 18966-4194	
Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement MM / DD / YYYY 05 / 27 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 256.1 <b>Transaction ID : B-E-309</b>
City Menlo Park	State CA Zip Code 94025-1452	
Purpose of Disbursement Advertising: Advertising	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2337.35
<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 26 OF 46	
	<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)  
**Dee Adcock for Congress**

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

Mailing Address 93 E Street Road

City Feasterville Treose State PA Zip Code 19053-6047

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement 05 / 27 / 2014

Amount of Each Disbursement this Period 338.65

Transaction ID : B-E-310

Category/Type 001

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

Mailing Address 1714 Brook Road

City Rydal State PA Zip Code 19046-1462

Purpose of Disbursement Reimburse electronic equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement 05 / 27 / 2014

Amount of Each Disbursement this Period 232.99

Transaction ID : B-E-300

Original vendors exceeding reporting threshold itemized as memo transactions.

Category/Type 001

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

Mailing Address 1200 12th Avenue S

City Seattle State WA Zip Code 98144-2712

Purpose of Disbursement Electronic Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement 05 / 27 / 2014

Amount of Each Disbursement this Period 232.99

Transaction ID : B-S-11

[MEMO ITEM]  
Subitemization of Ryan Adcock(05/27/14)

Category/Type 001

**SUBTOTAL** of Disbursements This Page (optional)..... 571.64

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 46	
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ryan Capone</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 2046 Parkview Avenue			Amount of Each Disbursement this Period 38.27
City Abington	State PA	Zip Code 19001-1222	
Purpose of Disbursement Reimburse Postage		Category/ Type 001	<b>Transaction ID : B-E-301</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Dexter Campaigns</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address PO Box 72			Amount of Each Disbursement this Period 2156
City Uwchland	State PA	Zip Code 19480-0072	
Purpose of Disbursement Consultant-FEC Compliance		Category/ Type 001	<b>Transaction ID : B-E-323</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Apple Store</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 2500 W Moreland Road			Amount of Each Disbursement this Period 772.69
City Willow Grove	State PA	Zip Code 19090-4003	
Purpose of Disbursement Administrative/Salary/Overhead: Computer		Category/ Type 001	<b>Transaction ID : B-E-318</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2966.96
<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 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 365.12
City Menlo Park	State CA	
Zip Code 94025-1452	Purpose of Disbursement Advertising: Advertising	<b>Transaction ID : B-E-319</b>
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo Payroll Serices</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 401 S Tryon Street		Amount of Each Disbursement this Period 104.5
City Charlotte	State NC	
Zip Code 28202-1911	Purpose of Disbursement Employers Payroll Tax	<b>Transaction ID : B-E-317</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Carol Lux</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 506 Gravel Hill Station		Amount of Each Disbursement this Period 30.8
City Southampton	State PA	
Zip Code 18966-4194	Purpose of Disbursement Travel: Mileage Reimbursement	<b>Transaction ID : B-E-328</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.42
<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 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement MM / DD / YYYY 06 / 04 / 2014
Mailing Address 830 Welsh Road		Amount of Each Disbursement this Period 147.57
City Huntingdon Valley	State PA	
Zip Code 19006-6015	Purpose of Disbursement Administrative/Salary/Overhead: Postage	<b>Transaction ID : B-E-333</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Complete Campaigns</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 5
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Credit Card Discount Fee	<b>Transaction ID : B-E-331</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RCR Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address 55 Beacon Hill Lane		Amount of Each Disbursement this Period 4704
City Phoenixville	State PA	
Zip Code 19460-2712	Purpose of Disbursement Paraphernalia: Palm Cards	<b>Transaction ID : B-E-336</b>
Candidate Name	Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4856.57
<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 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address 93 E Street Road		Amount of Each Disbursement this Period 611.31 <b>Transaction ID : B-E-334</b>
City Feasterville Treose	State PA Zip Code 19053-6047	
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Target</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address 1495 Old York Road		Amount of Each Disbursement this Period 66.04 <b>Transaction ID : B-E-335</b>
City Abington	State PA Zip Code 19001-1923	
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo Payroll Serices</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address 401 S Tryon Street		Amount of Each Disbursement this Period 490.61 <b>Transaction ID : B-E-315</b>
City Charlotte	State NC Zip Code 28202-1911	
Purpose of Disbursement Employers Payroll Tax	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	611.31
<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 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo Payroll Serices</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 401 S Tryon Street		Amount of Each Disbursement this Period 60 <b>Transaction ID : B-E-316</b>
City Charlotte	State NC	
Zip Code 28202-1911	Purpose of Disbursement Payroll Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ryan Capone</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 2046 Parkview Avenue		Amount of Each Disbursement this Period 1500 <b>Transaction ID : B-E-312</b>
City Abington	State PA	
Zip Code 19001-1222	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Travis Hill</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 824 Meadowbrook Drive		Amount of Each Disbursement this Period 280 <b>Transaction ID : B-E-314</b>
City Huntingdon Valley	State PA	
Zip Code 19006-6930	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1840.00
<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 32 OF 46	
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Carol Lux</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address 506 Gravel Hill Station		Amount of Each Disbursement this Period 725 <b>Transaction ID : B-E-313</b>
City Southampton	State PA	
Zip Code 18966-4194	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Campaign Grid LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 414 Commerce Drive Suite 100		Amount of Each Disbursement this Period 5000 <b>Transaction ID : B-E-344</b>
City Fort Washington	State PA	
Zip Code 19034-2620	Purpose of Disbursement Advertising: Advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Complete Campaigns</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 5 <b>Transaction ID : B-E-337</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Credit Card Discount Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5730.00
<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 33 OF 46	
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nation Builder</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 448 S Hill Street		Amount of Each Disbursement this Period 384.16 <b>Transaction ID : B-E-343</b>
City Los Angeles	State CA	
Zip Code 90013-1155	Purpose of Disbursement Website Hosting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. RCR Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 17 / 2014
Mailing Address 55 Beacon Hill Lane		Amount of Each Disbursement this Period 1948 <b>Transaction ID : B-E-352</b>
City Phoenixville	State PA	
Zip Code 19460-2712	Purpose of Disbursement Advertising: Media Production	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Complete Campaigns</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 650 <b>Transaction ID : B-E-356</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Software Support	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2982.16
<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 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. PAETEC</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address PO Box 9001111		Amount of Each Disbursement this Period 394.96 <b>Transaction ID : B-E-366</b>
City Louisville	State KY	
Zip Code 40290-1111	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo Payroll Serices</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 401 S Tryon Street		Amount of Each Disbursement this Period 572.12 <b>Transaction ID : B-E-360</b>
City Charlotte	State NC	
Zip Code 28202-1911	Purpose of Disbursement Employer Payroll Tax	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo Payroll Serices</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 401 S Tryon Street		Amount of Each Disbursement this Period 60 <b>Transaction ID : B-E-361</b>
City Charlotte	State NC	
Zip Code 28202-1911	Purpose of Disbursement Payroll Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1027.08
<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 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ryan Capone</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 2046 Parkview Avenue		Amount of Each Disbursement this Period 1500 <b>Transaction ID : B-E-358</b>
City Abington	State PA Zip Code 19001-1222	
Purpose of Disbursement Administrative/Salary/Overhead: Salary		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Travis Hill</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 824 Meadowbrook Drive		Amount of Each Disbursement this Period 775 <b>Transaction ID : B-E-359</b>
City Huntingdon Valley	State PA Zip Code 19006-6930	
Purpose of Disbursement Administrative/Salary/Overhead: Salary		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Carol Lux</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 506 Gravel Hill Station		Amount of Each Disbursement this Period 737.5 <b>Transaction ID : B-E-357</b>
City Southampton	State PA Zip Code 18966-4194	
Purpose of Disbursement Administrative/Salary/Overhead: Salary		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3012.50
<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 46	
	<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)  
**Dee Adcock for Congress**

**A. Public Opinion Strategies**

Full Name (Last, First, Middle Initial)  
Mailing Address 214 N Fayette Street

City Alexandria State VA Zip Code 22314-2433

Purpose of Disbursement  
Polling: Polling

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 26 / 2014

Amount of Each Disbursement this Period  
19500

Transaction ID : B-E-375

Category/Type: 005

**B. Rich Barr**

Full Name (Last, First, Middle Initial)  
Mailing Address 3100 Glenview Street  
Floor 1

City Phila State PA Zip Code 19149-2601

Purpose of Disbursement  
Paraphernalia: T-Shirts

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 26 / 2014

Amount of Each Disbursement this Period  
400

Transaction ID : B-E-374

Category/Type: 006

**c. Dexter Campaigns**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 72

City Uwchland State PA Zip Code 19480-0072

Purpose of Disbursement  
Consultant-FEC Compliance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
1725

Transaction ID : B-E-388

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 21625.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 46			
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 830 Welsh Road		Amount of Each Disbursement this Period 49 <b>Transaction ID : B-E-382</b>
City Huntingdon Valley	State PA	
Zip Code 19006-6015	Purpose of Disbursement Administrative/Salary/Overhead: Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 830 Welsh Road		Amount of Each Disbursement this Period 5.6 <b>Transaction ID : B-E-400</b>
City Huntingdon Valley	State PA	
Zip Code 19006-6015	Purpose of Disbursement Administrative/Salary/Overhead: Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Carson Dee Adcock</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 1714 Brook Road		Amount of Each Disbursement this Period 122.55 <b>Transaction ID : B-E-379</b>
City Jenkintown	State PA	
Zip Code 19046-1462	Purpose of Disbursement Travel: Mileage Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	177.15
<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 46	
	<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)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ryan Capone</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 2046 Parkview Avenue		Amount of Each Disbursement this Period 27.5 <b>Transaction ID : B-E-380</b>
City Abington	State PA Zip Code 19001-1222	
Purpose of Disbursement Reimburse Stationery Exp	Category/Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Travis Hill</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 824 Meadowbrook Drive		Amount of Each Disbursement this Period 39.2 <b>Transaction ID : B-E-378</b>
City Huntingdon Valley	State PA Zip Code 19006-6930	
Purpose of Disbursement Travel: Mileage Reimbursement	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Carol Lux</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 506 Gravel Hill Station		Amount of Each Disbursement this Period 15.68 <b>Transaction ID : B-E-377</b>
City Southampton	State PA Zip Code 18966-4194	
Purpose of Disbursement Travel: Mileage Reimbursement	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	82.38
<b>TOTAL</b> This Period (last page this line number only).....	232286.41

**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 46	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Dee Adcock for Congress**

Full Name (Last, First, Middle Initial) <b>A. 56th Ward Republican Executive Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 20 / 2014</b>
Mailing Address <b>7806 Frontenac Street</b>		Amount of Each Disbursement this Period <b>1200</b> <b>Transaction ID : B-E-292</b>
City <b>Phila</b> State <b>PA</b> Zip Code <b>19111-3527</b>	Purpose of Disbursement Non Federal Contribution <b>011</b> Category/ Type	
Candidate Name <b>56th Ward Republican Executive Committee</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>1200.00</b>

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L1

Dee Adcock for Congress

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

**[PERSONAL FUNDS]**

Election: 2014

Carson Dee Adcock

Primary

General

Other (specify) ▼

Mailing Address  
1714 Brook Road

City State ZIP Code  
Jenkintown PA 19046-1462

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
10000 0 10000

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 02 / D 21 / Y 2014 M M / D D / Y None 0.00 % (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)..... ▶ 10000.00  
**TOTALS** This Period (last page in this line only)..... ▶

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



# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L2

Dee Adcock for Congress

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

[PERSONAL FUNDS]

Election: 2014

Carson Dee Adcock

Primary

General

Other (specify) ▼

Mailing Address  
1714 Brook Road

City State ZIP Code  
Jenkintown PA 19046-1462

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
10000 0 10000

### TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 03 /

D 05 /

Y 2014 Y

M /

D /

Y None Y

0.00 % (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)..... ▶ 10000.00

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) **Dee Adcock for Congress** Transaction ID : **SC/10-L3**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Carson Dee Adcock</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1714 Brook Road		
City Jenkintown	State PA	ZIP Code 19046-1462

Original Amount of Loan 30000	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period 30000
----------------------------------	---------------------------------	--

**TERMS**

Date Incurred M 03 / D 31 / Y 2014	Date Due M / D / Y None	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	▶	30000.00
<b>TOTALS</b> 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) **Dee Adcock for Congress** Transaction ID : **SC/10-L4**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Carson Dee Adcock</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1714 Brook Road		

City	State	ZIP Code
Jenkintown	PA	19046-1462

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
62000	0	62000

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 30 / Y 2014	M / D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	▶	62000.00
<b>TOTALS</b> 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) **Dee Adcock for Congress** Transaction ID : **SC/10-L5**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Carson Dee Adcock Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address 1714 Brook Road  
 City State ZIP Code  
 Jenkintown PA 19046-1462

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
75000	0	75000

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 22 / Y 2014	M / D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	75000.00
<b>TOTALS</b> This Period (last page in this line only).....	<input type="text"/>

**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) **Dee Adcock for Congress** Transaction ID : **SC/10-L6**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Carson Dee Adcock Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address 1714 Brook Road  
 City Jenkintown State PA ZIP Code 19046-1462

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
28000	0	28000

**TERMS**  
 Date Incurred: M 06 / D 06 / Y 2014 Date Due: M / D / Y None Interest Rate: 0.00 % (apr) Secured:  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 28000.00  
**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) **Dee Adcock for Congress** Transaction ID : **SC/10-L7**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Carson Dee Adcock</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1714 Brook Road		

City	State	ZIP Code
Jenkintown	PA	19046-1462

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
15000	0	15000

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 26 / Y 2014	M / D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	▶	15000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	230000.00

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