

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

Mike Kelly For Congress

ADDRESS (number and street) ▼

PO Box 476

Check if different than previously reported. (ACC)

Lyndora

PA

16045

2. **FEC IDENTIFICATION NUMBER** ▼

C C00474189

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

PA

03

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 04 / 26 / 2016 in the State of PA

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

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

Election on / / in the State of

5. Covering Period

01 / 01 / 2016 through 04 / 06 / 2016

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

Type or Print Name of Treasurer Ann Coleman

Signature of Treasurer Ann Coleman

[Electronically Filed]

Date

04 / 11 / 2016

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

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Mike Kelly For Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	178128.93	1080973.51
(b) Total Contribution Refunds (from Line 20(d)) .....	.00	150.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	178128.93	1080823.51
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	115005.89	654222.59
(b) Total Offsets to Operating Expenditures (from Line 14).....	618.65	18844.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	114387.24	635378.31
8. Cash on Hand at Close of Reporting Period (from Line 27).....	674466.65	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	277995.00	

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

Mike Kelly For Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	65358.93	412026.79
(ii) Unitemized.....	10070.00	26154.95
(iii) TOTAL of contributions from individuals ▶	75428.93	438181.74
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	102700.00	642791.77
(d) The Candidate.....	.00	.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	178128.93	1080973.51
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	.00	32886.85
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	.00	.00
(b) All Other Loans.....	.00	.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	.00	.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	618.65	18844.28
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	1.30	63.77
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	178748.88	1132768.41

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	115005.89	654222.59
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	.00	.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.00	50000.00
(b) Of All Other Loans .....	.00	.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.00	50000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	.00	150.00
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	.00	150.00
21. OTHER DISBURSEMENTS	5000.00	16572.65
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	120005.89	720945.24

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	615723.66
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	178748.88
25. SUBTOTAL (add Line 23 and Line 24).....	794472.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	120005.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	674466.65

**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 133
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
William E Adams III

Mailing Address 1256 Buffalo Bill Cody Mem Hwy

City Portersville State PA Zip Code 16051

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

Name of Employer Adams Manufacturing Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1550.00

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

Transaction ID : SA11Ai-CN3162

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Christine M Allen

Mailing Address 399 Cornetti Rd

City Fenelton State PA Zip Code 16034

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11Ai-CN3164

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address PO Box 305
1307 Township Line Road

City Gwynedd Valley State PA Zip Code 19437

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

Name of Employer Asher's Chocolates Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11Ai-CN3282

Amount of Each Receipt this Period
2000.00

Memo Item

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

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

3000.00

**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 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Ronald A Baker

Mailing Address 1209 Butler Rd

City: Worthington State: PA Zip Code: 16262

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

Name of Employer: Baker Gas Occupation: Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 11 / 2016

Transaction ID : SA11Ai-CN3245

Amount of Each Receipt this Period: 250.00

Memo Item

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

Mailing Address 115 Rock Haven Ln

City: Pittsburgh State: PA Zip Code: 15228

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

Name of Employer: The Buncher Company Occupation: CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 600.00

Date of Receipt: 02 / 22 / 2016

Transaction ID : SA11Ai-CN3140

Amount of Each Receipt this Period: 250.00

Memo Item

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

Mailing Address 207 Blackthorn Dr

City: Butler State: PA Zip Code: 16002

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

Name of Employer: Morgan Stanley Occupation: Financial Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 04 / 2016

Transaction ID : SA11Ai-CN3192

Amount of Each Receipt this Period: 500.00

Memo Item

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

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

1000.00

**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 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
George Nicholas Beckwith III

Mailing Address 1 Little Ln

City Pittsburgh State PA Zip Code 15215

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

Name of Employer Arch Street Management Occupation Business Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11Ai-CN3150

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Frederick Y Bennitt

Mailing Address 3051 Edelweiss Ct

City Mars State PA Zip Code 16046

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : SA11Ai-CN3232

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
James R Berlin

Mailing Address 113 Glenruadh Ave

City Erie State PA Zip Code 16505

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

Name of Employer Logistics Plus Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
560.00

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

Transaction ID : SA11Ai-CN3114

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 133
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Susan Betts

Mailing Address 2856 Cedar Grove Loop

City State Zip Code
The Villages FL 32163

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
380.00

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

Transaction ID : SA11Ai-CN3200

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Georgie Blackburn

Mailing Address 1100 Constitution Dr

City State Zip Code
Tarentum PA 15084

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

Name of Employer Occupation
Blackburn's Physicians Pharmacy VP Gov't Relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : SA11Ai-CN3166

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Edward Boczar

Mailing Address 600 Main St

City State Zip Code
Pittsburgh PA 15215

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

Name of Employer Occupation
President AmGard

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11Ai-CN3217

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Florence M Bronder

Mailing Address 120 Freedom Rd

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : SA11Ai-CN3228

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 103 Braethorn Dr

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Bronder Technical Services CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11Ai-CN3291

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 336 Beaver Run Rd

City State Zip Code
Apollo PA 15613

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : SA11Ai-CN3177

Amount of Each Receipt this Period
100.00

Memo Item

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
David J Cippel

Mailing Address 2217 Center Ave

City State Zip Code
Ford City PA 16226

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

Name of Employer Occupation
Klingensmith's Drugstores Pharmacy Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3350.00

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

Transaction ID : SA11Ai-CN3254

Amount of Each Receipt this Period
350.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Matthew Clark

Mailing Address 529 Rachel Ct

City State Zip Code
Erie PA 16509

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

Name of Employer Occupation
Humes Chrysler Jeep Dodge Ram Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 05 / 2016

Transaction ID : SA11Ai-CN3098

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Stephen B. Clark

Mailing Address 9273 Lerwick Dr

City State Zip Code
Dublin OH 43017-9492

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

Name of Employer Occupation
Clark Lytle & Geduldig Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

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

Transaction ID : SA11Ai-CN3141

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 11 OF 133
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Jay W Cleveland Jr

Mailing Address 4565 William Penn Hwy

City Murraysville State PA Zip Code 15668

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

Name of Employer Cleveland Brothers Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

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

Transaction ID : SA11Ai-CN3132

Amount of Each Receipt this Period
2400.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mary Cleveland

Mailing Address 4565 William Penn Hwy

City Murraysville State PA Zip Code 15668

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : SA11Ai-CN3133

Amount of Each Receipt this Period
300.00

Memo Item

C. Full Name (Last, First, Middle Initial)
George M Currie

Mailing Address 4802 Wolf Rd

City Erie State PA Zip Code 16505

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

Name of Employer Erie Press Systems Occupation Executive VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11Ai-CN3197

Amount of Each Receipt this Period
500.00

Memo Item

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
William S Dearment

Mailing Address 438 Chestnut St

City Meadville State PA Zip Code 16335

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

Name of Employer Channellock Inc Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 16 / 2016

Transaction ID : SA11Ai-CN3211

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 110 Afton Dr

City Renfrew State PA Zip Code 16053

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

Name of Employer Butler Health System Occupation President/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 17 / 2016

Transaction ID : SA11Ai-CN3124

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Vincent Delie

Mailing Address 606 East Drive

City Sewickley State PA Zip Code 15143

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

Name of Employer First National Bank Of PA Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

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

Transaction ID : SA11Ai-CN3129

Amount of Each Receipt this Period
300.00

Memo Item

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

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

1800.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 13 OF 133

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
William Carroll Dicuccio

Mailing Address 104 Woodridge Rd

City State Zip Code
 Butler PA 16001

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

Name of Employer Occupation
 Butler Health System Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1500.00

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

Transaction ID : SA11Ai-CN3195

Amount of Each Receipt this Period
 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
William A Dicuccio

Mailing Address 304 Raven Crest Ct

City State Zip Code
 Gibsonia PA 15044

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

Name of Employer Occupation
 Physician Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : SA11Ai-CN3261

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Richard Donley

Mailing Address 433 Glen Arden Dr

City State Zip Code
 Pittsburgh PA 15208

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

Name of Employer Occupation
 Chaska Properties Real Estate Dev.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

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

Transaction ID : SA11Ai-CN3136

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Charles L Echnoz

Mailing Address 145 Saddle Club Rd

City Kittanning State PA Zip Code 16201

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

Name of Employer ESS Nextier Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2016

Transaction ID : SA11Ai-CN3154

Amount of Each Receipt this Period
 350.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Philip S English

Mailing Address 1050 Lookout Dr

City Erie State PA Zip Code 16507

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

Name of Employer Arent Fox Occupation Government Relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3450.00

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

Transaction ID : SA11Ai-CN3065

Amount of Each Receipt this Period
 2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
John Michael Ferretti II

Mailing Address 1237 St Marys Dr

City Erie State PA Zip Code 16509

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

Name of Employer LECOM Occupation Physician/educator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

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

Transaction ID : SA11Ai-CN3119

Amount of Each Receipt this Period
 2000.00

Memo Item

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

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

4350.00

**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 15 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
David Fink

Mailing Address 9 Sherwood Rd

City Windham State NH Zip Code 03087

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

Name of Employer Pan Am Systems Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : SA11Ai-CN3053

Amount of Each Receipt this Period
 300.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ethel J Galli

Mailing Address 140 Twinbrook Rd

City Valencia State PA Zip Code 16059

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11Ai-CN3180

Amount of Each Receipt this Period
 150.00

Memo Item

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

Mailing Address 1355 Yahres Rd

City Sharon State PA Zip Code 16146

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

Name of Employer Joy Cone Co. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

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

Transaction ID : SA11Ai-CN3208

Amount of Each Receipt this Period
 250.00

Memo Item

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 133
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Kelly A Giles		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 11 / 2016	
Mailing Address 101 Timothy Ln		Transaction ID : SA11Ai-CN3258	
City Butler	State PA	Zip Code 16001-1183	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 500.00	
Name of Employer Future POS	Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) B. Joseph L Gray		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 23 / 2016	
Mailing Address 75 Dutchtown Rd		Transaction ID : SA11Ai-CN3286	
City Butler	State PA	Zip Code 16002	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 200.00	
Name of Employer Self-employed	Occupation Engineer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 400.00		

Full Name (Last, First, Middle Initial) C. Stephen Ross Green		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 17 / 2016	
Mailing Address 207 Greenbriar Dr		Transaction ID : SA11Ai-CN3222	
City Cranberry Township	State PA	Zip Code 16066	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 500.00	
Name of Employer Self	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1200.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 133
	<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)
Mike Kelly For Congress

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

Mailing Address 126 Bay Mist Dr

City Erie State PA Zip Code 16505

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

Name of Employer Greenville Corp Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2016

Transaction ID : SA11Ai-CN3092

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
James M Greenleaf

Mailing Address 126 Bay Mist Dr

City Erie State PA Zip Code 16505

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

Name of Employer Greenville Corp Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2016

Transaction ID : SA11Ai-CN3093

Amount of Each Receipt this Period
1900.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mark Gusek

Mailing Address 5717 Clinton Dr

City Erie State PA Zip Code 16509

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

Name of Employer The Village at Luther Square Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11Ai-CN3113

Amount of Each Receipt this Period
500.00

Memo Item

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 18 OF 133
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Kathryn Hamilton

Mailing Address 3809 Turnberry Dr

City State Zip Code
West Des Moines IA 50265

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11Ai-CN3207

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ralph E Hardt

Mailing Address 164 Forsythe Rd

City State Zip Code
Valencia PA 16059

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

Name of Employer Occupation
HCG LLC Managing Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

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

Transaction ID : SA11Ai-CN3196

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Candy S Hartley

Mailing Address 3062 Edelweiss Ct

City State Zip Code
Mars PA 16046

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

Name of Employer Occupation
Unlimited Staffing Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11Ai-CN3293

Amount of Each Receipt this Period
 200.00

Memo Item

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
D. Michael Hartley

Mailing Address 115 Chancellor Court

City Mars State PA Zip Code 16046

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

Name of Employer Standard Bent Glass Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1700.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2016

Transaction ID : SA11Ai-CN3237

Amount of Each Receipt this Period
 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Eric Hunter

Mailing Address 2450 Shenango Valley Freeway

City Hermitage State PA Zip Code 16148

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

Name of Employer Hudson Group Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

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

Transaction ID : SA11Ai-CN3250

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Patti Ann L Kanterman

Mailing Address 171 E Airport Rd

City Butler State PA Zip Code 16002

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

Name of Employer Associated Ceramics Occupation Chief Financial Officer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2016

Transaction ID : SA11Ai-CN3235

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 20 OF 133
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

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

Mailing Address 4519 Antoinette Ct

City Erie State PA Zip Code 16506

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

Name of Employer Hubbard Bert Inc. Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

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

Transaction ID : SA11Ai-CN3103

Amount of Each Receipt this Period
 300.00

Memo Item

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

Mailing Address 7009 Arbor Ln

City Mclean State VA Zip Code 22101

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

Name of Employer Sidley Austin LLP Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

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

Transaction ID : SA11Ai-CN3302

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Thomas W King III

Mailing Address 456 Sheldon Rd

City Valencia State PA Zip Code 16059

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

Name of Employer Dillon McCandless King Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11Ai-CN3275

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Brian D Knapp

Mailing Address 2033 Winchester Ct

City Renfrew	State PA	Zip Code 16053
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Hefren Tillotson	Occupation Registered Representative
--------------------------------------	---

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11Ai-CN3227

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 222 Market St

City Kittanning	State PA	Zip Code 16201
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Nextier Bank	Occupation Banker
----------------------------------	----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11Ai-CN3218

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
Zachary Kroh

Mailing Address 809 Weldon Street

City Latrobe	State PA	Zip Code 15650
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Robindale Energy	Occupation VP Sales
--------------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11Ai-CN3060

Amount of Each Receipt this Period

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Raymond C Lassinger

Mailing Address 235 S Rebecca St
PO Box 42

City Saxonburg State PA Zip Code 16056

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11Ai-CN3315

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
John I Lewis Jr

Mailing Address 106 Ojibwa Dr

City Butler State PA Zip Code 16001

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

Name of Employer ACMH Occupation President/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11Ai-CN3082

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Ronald Lewis

Mailing Address 2 Fair Acres Drive

City Sewickely State PA Zip Code 15143

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

Name of Employer Self-employed Occupation Car Dealer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2016

Transaction ID : SA11Ai-CN3276

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Alexander H Lindsay Jr

Mailing Address 186 Iron Bridge Rd

City Sarver State PA Zip Code 16055

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

Name of Employer Lindsay Law Firm PC Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2016

Transaction ID : SA11Ai-CN3283

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Colleen Litkenhaus

Mailing Address 1121 D Street SE

City Washington State DC Zip Code 20003-2231

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

Name of Employer Dow Chemical Company Occupation Director Trade Relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

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

Transaction ID : SA11Ai-CN3101

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 101 Fairlane Dr

City Butler State PA Zip Code 16001

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

Name of Employer Self-employed Occupation Investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 15 / 2016

Transaction ID : SA11Ai-CN3062

Amount of Each Receipt this Period
400.00

Memo Item

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

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

1400.00

**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 24 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
David L Lloyd

Mailing Address 101 Fairlane Dr

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Self-employed Investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

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

Transaction ID : SA11Ai-CN3163

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Robert Lowther

Mailing Address 12737 Forrest Dr

City State Zip Code
Edinboro PA 16412

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

Name of Employer Occupation
Self-employed Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

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

Transaction ID : SA11Ai-CN3104

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 507 W. Crestview Avenue

City State Zip Code
Pittsburg KS 66762

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

Name of Employer Occupation
Watco Companies Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

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

Transaction ID : SA11Ai-CN3102

Amount of Each Receipt this Period
2000.00

Memo Item

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

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

2600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 133
	<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)
Mike Kelly For Congress

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

Mailing Address 4 Oakhurst Dr

City State Zip Code
Butler PA 16002

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

Name of Employer Occupation
Self-employed Orthodontist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 05 / 2016

Transaction ID : SA11Ai-CN3090

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Beverly Manne

Mailing Address 2137 Beechwood Blvd

City State Zip Code
Pittsburgh PA 15217

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

Name of Employer Occupation
Attorney Tucker Arensberg PC

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11Ai-CN3138

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Michael P Martin

Mailing Address 5216 Wolf Run Dr

City State Zip Code
Erie PA 16505

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

Name of Employer Occupation
Printing Concepts President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

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

Transaction ID : SA11Ai-CN3106

Amount of Each Receipt this Period
750.00

Memo Item

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Lisa D McCain

Mailing Address 4025 Westbury Rdg

City Erie	State PA	Zip Code 16506
--------------	-------------	-------------------

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

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

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

Transaction ID : SA11Ai-CN3105

Amount of Each Receipt this Period
 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mark McClymonds

Mailing Address PO Box 296

City Portersville	State PA	Zip Code 16051
----------------------	-------------	-------------------

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

Name of Employer McClymonds Trucking	Occupation Owner
---	---------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

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

Transaction ID : SA11Ai-CN3259

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 202 Chesapeake Dr

City Gibsonia	State PA	Zip Code 15044
------------------	-------------	-------------------

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

Name of Employer Duquesne University	Occupation Professor
---	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

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

Transaction ID : SA11Ai-CN3257

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
David L McKivigan

Mailing Address 8 Pittsburgh Rd

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Butler Tire Distributor Tire Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

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

Transaction ID : SA11Ai-CN3311

Amount of Each Receipt this Period
 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
David M Miller

Mailing Address 2032 Miller Dr

City State Zip Code
Jamestown PA 16134

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

Name of Employer Occupation
Thiel College Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

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

Transaction ID : SA11Ai-CN3182

Amount of Each Receipt this Period
 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Cesar P Miranda

Mailing Address 585 Second St

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Physician Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11Ai-CN3294

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Chris J Mitsos

Mailing Address 109 Ludwig Rd

City State Zip Code
New Castle PA 16105

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

Name of Employer Occupation
Attorney Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11Ai-CN3244

Amount of Each Receipt this Period
 50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
James B Molloy

Mailing Address 1089 Slippery Rock Rd

City State Zip Code
Grove City PA 16127

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

Name of Employer Occupation
Self-employed Trucking Company

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11Ai-CN3161

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 1 Park Edge Dr

City State Zip Code
Zelienople PA 16063

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11Ai-CN3165

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

800.00

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

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

FOR LINE NUMBER: PAGE 29 OF 133
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

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

Mailing Address 3910 E 91st Ave

City Parrish State FL Zip Code 34219

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

Name of Employer LECOM Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

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

Transaction ID : SA11Ai-CN3314

Amount of Each Receipt this Period
400.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Guy A Natale

Mailing Address 3256 Greentree Cir

City New Castle State PA Zip Code 16105

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

Name of Employer Arnett Carbis Toothman CPAs Occupation CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 15 / 2016

Transaction ID : SA11Ai-CN3061

Amount of Each Receipt this Period
300.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Edward R Natali

Mailing Address 749 Bullcreek Rd

City Butler State PA Zip Code 16002

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

Name of Employer NLMK Pennsylvania Inc. Occupation Project Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1050.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : SA11Ai-CN3238

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 133
	<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)
Mike Kelly For Congress

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

Mailing Address 720 Oliver Bldg

City Pittsburgh State PA Zip Code 15222

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

Name of Employer: Oliver Natural Resources Occupation: Business Owners

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 02 / 22 / 2016

Transaction ID : SA11Ai-CN3126

Amount of Each Receipt this Period: 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ronald Olsen

Mailing Address 322 Hickory Street

City Butler State PA Zip Code 16001

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

Name of Employer: Olsen Craft Associates LLC Occupation: Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 03 / 11 / 2016

Transaction ID : SA11Ai-CN3260

Amount of Each Receipt this Period: 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Leslie Ann Osche

Mailing Address 4181 Cypress St

City Butler State PA Zip Code 16001

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

Name of Employer: Butler County Occupation: County Commissioner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 400.00

Date of Receipt: 03 / 28 / 2016

Transaction ID : SA11Ai-CN3216

Amount of Each Receipt this Period: 250.00

Memo Item

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Philip Eugene Pandolph

Mailing Address 20480 Limber Creek Dr

City State Zip Code
Meadville PA 16335

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

Name of Employer Occupation
Meadville Medical Center Administrator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

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

Transaction ID : SA11Ai-CN3070

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Gail A Paserba

Mailing Address 121 Mountain Laurel Dr

City State Zip Code
Butler PA 16002

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

Name of Employer Occupation
IQC Inc. Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

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

Transaction ID : SA11Ai-CN3256

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Jeffrey E Plyler

Mailing Address 8850 Fry Rd

City State Zip Code
Mckean PA 16426

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

Name of Employer Occupation
Plyler Overhead Door Co CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11Ai-CN3264

Amount of Each Receipt this Period
250.00

Memo Item

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Robert Preston

Mailing Address 222 Chippewa Dr

City State Zip Code
New Castle PA 16105

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

Name of Employer Occupation
Preston Auto Group Car Dealer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2016

Transaction ID : SA11Ai-CN3056

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Charles Queenan

Mailing Address 433 Jefferson Court

City State Zip Code
Pittsburgh PA 15243

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

Name of Employer Occupation
K&L Gates Counsel

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

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

Transaction ID : SA11Ai-CN3134

Amount of Each Receipt this Period
1700.00

Memo Item

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

Mailing Address 433 Jefferson Court

City State Zip Code
Pittsburgh PA 15243

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

Name of Employer Occupation
K&L Gates Counsel

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

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

Transaction ID : SA11Ai-CN3135

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

3700.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 33 OF 133

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
William Rackoff

Mailing Address 3 Twin Pine Court

City Pittsburgh State PA Zip Code 15215

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

Name of Employer ASKO Inc. Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1500.00

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

Transaction ID : SA11Ai-CN3139

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Roger W Richards

Mailing Address 1928 S Shore Dr

City Erie State PA Zip Code 16505

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

Name of Employer Self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 5417.86

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2016

Transaction ID : SA11Ai-CN3089

Amount of Each Receipt this Period
 1358.93

Memo Item

C. Full Name (Last, First, Middle Initial)
Rita M Rippin

Mailing Address 210 Stirling Dr

City Butler State PA Zip Code 16001

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

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

Transaction ID : SA11Ai-CN3190

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

2858.93

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

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

FOR LINE NUMBER: PAGE 34 OF 133
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Ellen S Romett

Mailing Address 114 Edgewood Rd

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1150.00

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

Transaction ID : SA11Ai-CN3316

Amount of Each Receipt this Period
 200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
James T Ryan

Mailing Address 7315 River Hammock Drive Unit 102

City State Zip Code
Bradenton FL 34212

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

Name of Employer Occupation
Consultant Self-employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : SA11Ai-CN3240

Amount of Each Receipt this Period
 200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
William B Salsgiver Jr

Mailing Address 558 Callery Rd

City State Zip Code
Cranberry Township PA 16066

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : SA11Ai-CN3234

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

900.00

**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 35 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Timothy M Schell

Mailing Address 319 Nicklaus Ct

City State Zip Code
Grove City PA 16127

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

Name of Employer Self Occupation Physical Therapist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 27 / 2016

Transaction ID : SA11Ai-CN3057

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Brian Scher

Mailing Address 204 Montant Drive

City State Zip Code
Palm Beach Gardens FL 33410

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

Name of Employer Attorney Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : SA11Ai-CN3239

Amount of Each Receipt this Period
300.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Gary P Schneider

Mailing Address 13 Niagara Pier

City State Zip Code
Erie PA 16507

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

Name of Employer Howard Industries Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2016

Transaction ID : SA11Ai-CN3085

Amount of Each Receipt this Period
750.00

Memo Item

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

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

1100.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 36 OF 133

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Matt Shaner

Mailing Address 529 Pine Rd

City State Zip Code
 Sewickley PA 15143

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

Name of Employer Occupation
 Shaner Investments CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

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

Transaction ID : SA11Ai-CN3125

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Charles H Snyder Jr

Mailing Address 156 Bell Top Dr

City State Zip Code
 Kittanning PA 16201

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

Name of Employer Occupation
 Snyder Associates Co. Officer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2016

Transaction ID : SA11Ai-CN3220

Amount of Each Receipt this Period
 350.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Donald Snyder

Mailing Address 223 Welsh Rd

City State Zip Code
 Valencia PA 16059

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

Name of Employer Occupation
 Info Requested Info Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1100.00

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

Transaction ID : SA11Ai-CN3173

Amount of Each Receipt this Period
 100.00

Memo Item

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

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

1450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 133
	<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)
Mike Kelly For Congress

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

Mailing Address 160 East Brady Rd
PO Box 1022

City Kittanning State PA Zip Code 16201

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

Name of Employer Snyder Associated Co. Occupation Business Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

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

Transaction ID : SA11Ai-CN3175

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mark A Snyder

Mailing Address 160 East Brady Rd
PO Box 1022

City Kittanning State PA Zip Code 16201

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

Name of Employer Snyder Associated Co. Occupation Business Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **850.00**

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

Transaction ID : SA11Ai-CN3312

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Richard G Snyder

Mailing Address 849 East Brady Rd

City Cowansville State PA Zip Code 16218

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

Name of Employer Snyder Associates Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

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

Transaction ID : SA11Ai-CN3174

Amount of Each Receipt this Period
300.00

Memo Item

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
DJ Song

Mailing Address 913 Valleyview Rd

City Pittsburgh	State PA	Zip Code 15243
--------------------	-------------	-------------------

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

Name of Employer HICO America	Occupation Chairman/CEO
----------------------------------	----------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11Ai-CN3137

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 512 W Main St

City Grove City	State PA	Zip Code 16127
--------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

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

Transaction ID : SA11Ai-CN3099

Amount of Each Receipt this Period
 400.00

Memo Item

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

Mailing Address 3231 NW Rittenhouse St

City Washington	State DC	Zip Code 20015
--------------------	-------------	-------------------

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

Name of Employer Forbes Tate Partners	Occupation Lobbyist
--	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11Ai-CN3301

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

1900.00

**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 39 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Thevaraya N Subbiah

Mailing Address 3 Trillium Cir

City State Zip Code
Butler PA 16002

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

Name of Employer Occupation
Butler Medical Providers Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

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

Transaction ID : SA11Ai-CN3194

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Carl J Succop

Mailing Address 7022 Forrest Trail Rd

City State Zip Code
Butler PA 16002

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

Name of Employer Occupation
Physician Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11Ai-CN3226

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 18 Brookside Dr

City State Zip Code
Goshen NY 10924

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

Name of Employer Occupation
RI Suresky & Sons Inc. Auto Dealer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

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

Transaction ID : SA11Ai-CN3313

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 40 OF 133
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Cynthia B Sweeney

Mailing Address 132 Andrews Trce

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 15 / 2016

Transaction ID : SA11Ai-CN3067

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
J. Carter Tackett

Mailing Address 1311 Player Way

City State Zip Code
Gibsonia PA 15044

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : SA11Ai-CN3231

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Beatrice M Turner

Mailing Address 110 Windhaven Ln

City State Zip Code
Portersville PA 16051

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 21 / 2016

Transaction ID : SA11Ai-CN3295

Amount of Each Receipt this Period
250.00

Memo Item

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Wendy S Turner

Mailing Address 329 Turner Ln
PO Box 371

City Harrisville State PA Zip Code 16038

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

Name of Employer Turner Insurance Agency Occupation Insurance Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11Ai-CN3199

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Michael J Visnosky

Mailing Address 5848 Forest Xing

City Erie State PA Zip Code 16506

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

Name of Employer Millcreek Community Hospital Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11Ai-CN3117

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Michael E Walsh

Mailing Address 7042 Forrest Trail Rd

City Butler State PA Zip Code 16002

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

Name of Employer Walsh Equipment Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

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

Transaction ID : SA11Ai-CN3193

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Curt A Weiland

Mailing Address 207 Stirling Dr

City Butler	State PA	Zip Code 16001
----------------	-------------	-------------------

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

Name of Employer Katherine Ryan DO	Occupation Associate
---------------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11Ai-CN3288

Amount of Each Receipt this Period
150.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Karen E Wise

Mailing Address 128 Forest Mere Cir

City Butler	State PA	Zip Code 16002
----------------	-------------	-------------------

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

Name of Employer Eagle Printery	Occupation Printer
------------------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

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

Transaction ID : SA11Ai-CN3172

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Michael Wolcott

Mailing Address 7670 Mcknight Rd

City Pittsburgh	State PA	Zip Code 15237
--------------------	-------------	-------------------

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

Name of Employer Wolcott Holdings	Occupation Auto Dealer
--------------------------------------	---------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

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

Transaction ID : SA11Ai-CN3145

Amount of Each Receipt this Period
700.00

Memo Item

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

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

1350.00

**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 43 OF 133
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Michael Wolcott

Mailing Address 7670 Mcknight Rd

City Pittsburgh State PA Zip Code 15237

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

Name of Employer Wolcott Holdings Occupation Auto Dealer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **4700.00**

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

Transaction ID : SA11Ai-CN3146

Amount of Each Receipt this Period
 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Louise R Yates

Mailing Address 107 Park Crest Ln

City Butler State PA Zip Code 16001

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : SA11Ai-CN3233

Amount of Each Receipt this Period
 100.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

2100.00

65358.93

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. AICPA PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address Palladian Corporate Center I
 220 Leigh Farm Rd
 City Durham State NC Zip Code 27707
 FEC ID number of contributing federal political committee. **C C00077321**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2016
Transaction ID : SA11C-CN3159
 Amount of Each Receipt this Period
 2000.00
 Memo Item

B. American Bankers Assoc PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1120 Connecticut Avenue NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C C00004275**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : SA11C-CN3317
 Amount of Each Receipt this Period
 4000.00
 Memo Item

C. American Hospital Assoc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Tenth Street NW Suite 400
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C C00106146**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016
Transaction ID : SA11C-CN3120
 Amount of Each Receipt this Period
 3000.00
 Memo Item

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

9000.00

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

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

FOR LINE NUMBER: PAGE 45 OF 133
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
American Medical Association PAC

Mailing Address 25 Massachusetts Ave NW
Suite 600

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

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

Transaction ID : SA11C-CN3326

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
American Society of Association Executives PAC

Mailing Address 1575 I Street NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00041566**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 23 / 2016

Transaction ID : SA11C-CN3268

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Assoc. for Advanced Life Underwriting PAC

Mailing Address 11921 Freedom Dr
Ste 1100

City Reston State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C C00447565**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11C-CN3325

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
AT&T Inc Federal PAC

Mailing Address 208 S Akard St
Ste 2701

City Dallas State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11C-CN3262

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BLUEPAC-Blue Cross And Blue Shield Association

Mailing Address 1310 G St NW 12th Fl.

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

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

Transaction ID : SA11C-CN3116

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Boeing Company PAC - BPAC

Mailing Address 929 Long Bridge Drive

City Arlington State VA Zip Code 22202-4208

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2016

Transaction ID : SA11C-CN3156

Amount of Each Receipt this Period
2000.00

Memo Item

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Boeing Company PAC - BPAC

Full Name (Last, First, Middle Initial)
Boeing Company PAC - BPAC

Mailing Address 929 Long Bridge Drive

City Arlington State VA Zip Code 22202-4208

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 6000.00

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

Transaction ID : SA11C-CN3334

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Buffalo Wild Wings PAC

Full Name (Last, First, Middle Initial)
Buffalo Wild Wings PAC

Mailing Address 5500 Wayzata Blvd Suite 1600

City Minneapolis State MN Zip Code 55416

FEC ID number of contributing federal political committee. **C** C00492157

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11C-CN3272

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Consol Energy Inc. PAC

Full Name (Last, First, Middle Initial)
Consol Energy Inc. PAC

Mailing Address 1000 Consol Energy Dr

City Canonsburg State PA Zip Code 15317

FEC ID number of contributing federal political committee. **C** C00279331

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

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

Transaction ID : SA11C-CN3242

Amount of Each Receipt this Period
 2500.00

Memo Item

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Covington & Burlington PAC

Mailing Address 850 Tenth Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00462630**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11C-CN3273

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CSX Corp. Good Gov't Fund

Mailing Address 1331 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11C-CN3265

Amount of Each Receipt this Period
 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CSX Corp. Good Gov't Fund

Mailing Address 1331 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11C-CN3266

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

4000.00

**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 49 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Deloitte Federal PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 365
 City Washington State DC Zip Code 20044
 FEC ID number of contributing federal political committee. **C C00211318**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2016
Transaction ID : SA11C-CN3324
 Amount of Each Receipt this Period
2000.00
 Memo Item

B. Dominion PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 James River Plaza 20th Fl
 City Richmond State VA Zip Code 23261
 FEC ID number of contributing federal political committee. **C C00545319**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 15 / 2016
Transaction ID : SA11C-CN3059
 Amount of Each Receipt this Period
1000.00
 Memo Item

C. Duke Energy Corporation PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 550 South Tryon Street
 City Charlotte State NC Zip Code 28202
 FEC ID number of contributing federal political committee. **C C00083535**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 05 / 2016
Transaction ID : SA11C-CN3095
 Amount of Each Receipt this Period
1000.00
 Memo Item

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

4000.00

**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 50 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Education Management Corporation Employee PAC

Full Name (Last, First, Middle Initial)
Education Management Corporation Employee PAC

Mailing Address 210 6th Ave
33rd Floor

City Pittsburgh State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00466169

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 15 / 2016

Transaction ID : SA11C-CN3147

Amount of Each Receipt this Period
2500.00

Memo Item

B. Endo Pharmaceuticals Inc. PAC

Full Name (Last, First, Middle Initial)
Endo Pharmaceuticals Inc. PAC

Mailing Address 100 Endo Blvd.

City Chadds Ford State PA Zip Code 19317

FEC ID number of contributing federal political committee. **C** C00452052

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11C-CN3327

Amount of Each Receipt this Period
1000.00

Memo Item

C. Ernst & Young PAC

Full Name (Last, First, Middle Initial)
Ernst & Young PAC

Mailing Address 1101 New York Avenue NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2016

Transaction ID : SA11C-CN3221

Amount of Each Receipt this Period
2000.00

Memo Item

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 51 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Family PAC

Full Name (Last, First, Middle Initial)
Mailing Address c/o The Beechwood Co
1001 Liberty Ave
City Pittsburgh State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C C00336842**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
MM / DD / YYYY
02 / 22 / 2016

Transaction ID : SA11C-CN3151

Amount of Each Receipt this Period
1000.00

Memo Item

B. Farm Credit Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 50 F Street NW Suite 900
City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00193631**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
01 / 15 / 2016

Transaction ID : SA11C-CN3058

Amount of Each Receipt this Period
1000.00

Memo Item

C. FNB Corporation PAC

Full Name (Last, First, Middle Initial)
Mailing Address 3015 Glimcher Blvd
City Hermitage State PA Zip Code 16148

FEC ID number of contributing federal political committee. **C C00514026**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3200.00

Date of Receipt
MM / DD / YYYY
02 / 22 / 2016

Transaction ID : SA11C-CN3144

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

4700.00

**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 52 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Forging PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1111 Superior Avenue Suite 615

City Cleveland State OH Zip Code 44114

FEC ID number of contributing federal political committee. **C C00470252**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2016

Transaction ID : SA11C-CN3096

Amount of Each Receipt this Period
 1000.00

Memo Item

B. General Electric PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1299 Pennsylvania Ave NW #900

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11C-CN3108

Amount of Each Receipt this Period
 2000.00

Memo Item

C. Highmark Health PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1800 Center St

City Camp Hill State PA Zip Code 17089-0089

FEC ID number of contributing federal political committee. **C C00302844**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11C-CN3149

Amount of Each Receipt this Period
 1000.00

Memo Item

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 53 OF 133
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Highmark Health PAC

Mailing Address 1800 Center St

City State Zip Code
Camp Hill PA 17089-0089

FEC ID number of contributing federal political committee. **C C00302844**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 05 / 2016

Transaction ID : SA11C-CN3152

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Honeywell International PAC

Mailing Address 101 Constitution Ave Nw
Ste 500 W

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 05 / 2016

Transaction ID : SA11C-CN3094

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JP Morgan Chase & Co. Federal PAC

Mailing Address 601 Pennsylvania Ave NW 7th floor

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C C00104299**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 05 / 2016

Transaction ID : SA11C-CN3153

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

3500.00

**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 54 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
K & L Gates LLP

Mailing Address 1601 K Street NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11C-CN3148

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Keystone Alliance PAC

Mailing Address PO Box 3883

City Philadelphia State PA Zip Code 19146

FEC ID number of contributing federal political committee. **C C00432096**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11C-CN3270

Amount of Each Receipt this Period
4000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Lockheed Martin Employees PAC

Mailing Address 2121 Crystal Dr

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2016

Transaction ID : SA11C-CN3160

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 55 OF 133
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. MBA PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2171 W 38th St
 City Erie State PA Zip Code 16508
 FEC ID number of contributing federal political committee. **C C00199463**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2016
Transaction ID : SA11C-CN3068
 Amount of Each Receipt this Period
 1500.00
 Memo Item

B. McDonald's PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2111 Mcdonald's Dr
 City Oak Brook State IL Zip Code 60523
 FEC ID number of contributing federal political committee. **C C00063164**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : SA11C-CN3323
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. National Association Of Insurance And Financial Advisors PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2901 Telestar Ct
 City Falls Church State VA Zip Code 22042
 FEC ID number of contributing federal political committee. **C C00005249**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2016
Transaction ID : SA11C-CN3158
 Amount of Each Receipt this Period
 3000.00
 Memo Item

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 56 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. National Auto Dealers Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 412 First Street SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00040998**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

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

Transaction ID : SA11C-CN3143

Amount of Each Receipt this Period
2000.00

Memo Item

B. National Emergency Medicine PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 619911

City Dallas State TX Zip Code 75261

FEC ID number of contributing federal political committee. **C C00140061**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

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

Transaction ID : SA11C-CN3318

Amount of Each Receipt this Period
1500.00

Memo Item

C. New York Life Insurance PAC

Full Name (Last, First, Middle Initial)
Mailing Address 51 Madison Avenue Room 1109

City New York State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

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

Transaction ID : SA11C-CN3335

Amount of Each Receipt this Period
500.00

Memo Item

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

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

4000.00

**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 57 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
NFG FEDPAC

Mailing Address 10 Lafayette Sq

City Buffalo State NY Zip Code 14203

FEC ID number of contributing federal political committee. **C C00083758**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6250.00

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

Transaction ID : SA11C-CN3118

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NSSGA RockPAC

Mailing Address 1605 King St

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00089458**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

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

Transaction ID : SA11C-CN3336

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Nuclear Energy Institute Federal PAC

Mailing Address 1201 F Street NW
11th Floor

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00239848**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 05 / 2016

Transaction ID : SA11C-CN3157

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

4000.00

**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 58 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
PPG Better Government Team

Mailing Address One PPG Place

City Pittsburgh State PA Zip Code 15272

FEC ID number of contributing federal political committee. **C** C00034298

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

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

Transaction ID : SA11C-CN3115

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 600 13th Street NW
Suite 1000

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 9000.00

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

Transaction ID : SA11C-CN3243

Amount of Each Receipt this Period
 2000.00

Memo Item

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

Mailing Address 600 13th Street NW
Suite 1000

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11C-CN3269

Amount of Each Receipt this Period
 1000.00

Memo Item

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

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

4000.00

**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 59 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Prudential Financial Inc. Federal PAC

Mailing Address 751 Broad Street
14th Floor

City Newark State NJ Zip Code 07102

FEC ID number of contributing federal political committee. **C C00127779**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2016

Transaction ID : SA11C-CN3064

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 1100 Wilson Blvd
Suite 1500

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

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

Transaction ID : SA11C-CN3322

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 430 N Michigan Ave

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11C-CN3277

Amount of Each Receipt this Period
3000.00

Memo Item

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Seniors Housing PAC

Full Name (Last, First, Middle Initial)
Seniors Housing PAC

Mailing Address 5100 Wisconsin Ave NW Suite 307

City Washington State DC Zip Code 20016

FEC ID number of contributing federal political committee. **C** C00325332

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11C-CN3279

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Sheet Metal & Air Conditioning Contractors PAC

Full Name (Last, First, Middle Initial)
Sheet Metal & Air Conditioning Contractors PAC

Mailing Address PO Box 221230

City Chantilly State VA Zip Code 20153

FEC ID number of contributing federal political committee. **C** C00013961

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

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

Transaction ID : SA11C-CN3330

Amount of Each Receipt this Period
 4000.00

Memo Item

C. Squire Patton Boggs PAC

Full Name (Last, First, Middle Initial)
Squire Patton Boggs PAC

Mailing Address 2550 M Street NW

City Washington State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C** C00401083

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11C-CN3278

Amount of Each Receipt this Period
 1000.00

Memo Item

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

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

Mailing Address 6405 Metcalf Avenue Suite 503

City Shawnee Mission State KS Zip Code 66202

FEC ID number of contributing federal political committee. **C** C00330118

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

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

Transaction ID : SA11C-CN3320

Amount of Each Receipt this Period
 2500.00

Memo Item

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

Mailing Address 6405 Metcalf Avenue Suite 503

City Shawnee Mission State KS Zip Code 66202

FEC ID number of contributing federal political committee. **C** C00330118

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 7500.00

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

Transaction ID : SA11C-CN3321

Amount of Each Receipt this Period
 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
The Williams Companies Inc. PAC

Mailing Address 1627 I St NW Ste 900

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00040394

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11C-CN3271

Amount of Each Receipt this Period
 2000.00

Memo Item

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
TIAA-CREF Political Action Committee

Mailing Address 601 Thirteenth St NW #700N

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00431361

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : SA11C-CN3267

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Truck Renting & Leasing Assoc PAC

Mailing Address 675 N. Washington St Suite 410

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00499400

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11C-CN3297

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
UBS Americas Inc. PAC

Mailing Address 1500 K St NW Suite 1100

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2016

Transaction ID : SA11C-CN3155

Amount of Each Receipt this Period
1500.00

Memo Item

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 63 OF 133
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

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

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

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

Transaction ID : SA11C-CN3328

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
US Acute Care Soutions PAC

Mailing Address 4535 Dressler Road NW

City Canton State OH Zip Code 44718

FEC ID number of contributing federal political committee. **C** C00544957

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2016

Transaction ID : SA11C-CN3063

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Wendy's

Mailing Address PO Box 15441

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00369090

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : SA11C-CN3329

Amount of Each Receipt this Period
2500.00

Memo Item

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

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

5500.00

102700.00

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

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

FOR LINE NUMBER: PAGE 64 OF 133
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Waldorf Astoria

Mailing Address 301 Park Avenue

City State Zip Code
New York NY 10022

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
551.24

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

Transaction ID : SA14-ER13

Amount of Each Receipt this Period
551.24

Memo Item
Expenditure Refund

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

551.24

551.24

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Trail Blazer Campaign Services Inc.		Date of Disbursement MM / DD / YYYY 01 / 07 / 2016
Mailing Address 620 Mendelssohn Avenue N Suite 186		Amount of Each Disbursement this Period 6500.00
City Golden Valley State MN Zip Code 55427	Purpose of Disbursement Financial software one-year license	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX971 Financial software one-year license
State: District:		

Full Name (Last, First, Middle Initial) B. Trail Blazer Campaign Services Inc.		Date of Disbursement MM / DD / YYYY 01 / 27 / 2016
Mailing Address 620 Mendelssohn Avenue N Suite 186		Amount of Each Disbursement this Period 1100.00
City Golden Valley State MN Zip Code 55427	Purpose of Disbursement Data conversion	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX962 Data conversion
State: District:		

Full Name (Last, First, Middle Initial) c. Ann Coleman		Date of Disbursement MM / DD / YYYY 01 / 01 / 2016
Mailing Address 6758 St. Regis Blvd.		Amount of Each Disbursement this Period 826.28
City Hudson State OH Zip Code 44236	Purpose of Disbursement Mileage reimbursement for Nov/Dec 2015	
Candidate Name	Category/Type 002	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX978 Mileage reimbursement for Nov/Dec 2015
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8426.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Ann Coleman		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016
Mailing Address 6758 St. Regis Blvd.		Amount of Each Disbursement this Period 3279.72
City Hudson State OH Zip Code 44236	Purpose of Disbursement January salary & 2015 bonus	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX995 January salary & 2015 bonus
State: District:		

Full Name (Last, First, Middle Initial) B. Ann Coleman		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016
Mailing Address 6758 St. Regis Blvd.		Amount of Each Disbursement this Period 3594.69
City Hudson State OH Zip Code 44236	Purpose of Disbursement 4th quarter 2015 fundraising commission	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX996 4th quarter 2015 fundraising commission
State: District:		

Full Name (Last, First, Middle Initial) c. Ann Coleman		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2016
Mailing Address 6758 St. Regis Blvd.		Amount of Each Disbursement this Period 2289.07
City Hudson State OH Zip Code 44236	Purpose of Disbursement February payroll	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1014 February payroll
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9163.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Ann Coleman		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 6758 St. Regis Blvd.		Amount of Each Disbursement this Period 640.98
City Hudson State OH Zip Code 44236	Purpose of Disbursement Mileage reimbursement for February 2016 Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Memo Item <input type="checkbox"/> Transaction ID : SB17-EX1107 Mileage reimbursement for February 2016
State: District:		

Full Name (Last, First, Middle Initial) B. Ann Coleman		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 6758 St. Regis Blvd.		Amount of Each Disbursement this Period 1546.97
City Hudson State OH Zip Code 44236	Purpose of Disbursement March 2016 salary Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Memo Item <input type="checkbox"/> Transaction ID : SB17-EX1108 March 2016 salary
State: District:		

Full Name (Last, First, Middle Initial) c. Ann Coleman		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address 6758 St. Regis Blvd.		Amount of Each Disbursement this Period 1546.97
City Hudson State OH Zip Code 44236	Purpose of Disbursement April 2016 Salary Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Memo Item <input type="checkbox"/> Transaction ID : SB17-EX1212 April 2016 Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3734.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. George J. Howe Candy		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016
Mailing Address 629 West Main Street		Amount of Each Disbursement this Period 218.17
City Grove City	State PA Zip Code 16127	
Purpose of Disbursement Parade candy	Category/Type 007	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1154 Parade candy
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Shockey Mini Storage		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address 140 Shockey Lane		Amount of Each Disbursement this Period 40.00
City Butler	State PA Zip Code 16001	
Purpose of Disbursement Storage unit rental fees	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX924 Storage unit rental fees
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Shockey Mini Storage		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2016
Mailing Address 140 Shockey Lane		Amount of Each Disbursement this Period 40.00
City Butler	State PA Zip Code 16001	
Purpose of Disbursement Storage unit rental expense	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1045 Storage unit rental expense
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	298.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Shockey Mini Storage			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016
Mailing Address 140 Shockey Lane			Amount of Each Disbursement this Period 40.00 <input type="checkbox"/> Memo Item
City Butler	State PA	Zip Code 16001	
Purpose of Disbursement Storage unit rental expense		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17-EX1114 Storage unit rental expense	
State: District:			

Full Name (Last, First, Middle Initial) B. Shockey Mini Storage			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 140 Shockey Lane			Amount of Each Disbursement this Period 40.00 <input type="checkbox"/> Memo Item
City Butler	State PA	Zip Code 16001	
Purpose of Disbursement Storage unit rental expense		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17-EX1203 Storage unit rental expense	
State: District:			

Full Name (Last, First, Middle Initial) c. People For Life			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2016
Mailing Address PO Box 1126			Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Memo Item
City Erie	State PA	Zip Code 16512	
Purpose of Disbursement Breakfast sponsorship		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17-EX983 Breakfast sponsorship	
State: District:			

SUBTOTAL of Disbursements This Page (optional)	330.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Simple Toll Free		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016
Mailing Address 430 E. Pacific Coast Highway		Amount of Each Disbursement this Period 7.88
City Long Beach	State CA	
Zip Code 90806	Purpose of Disbursement Conference call expenses	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX930
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Conference call expenses
State: District:		

Full Name (Last, First, Middle Initial) B. Simple Toll Free		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016
Mailing Address 430 E. Pacific Coast Highway		Amount of Each Disbursement this Period 12.35
City Long Beach	State CA	
Zip Code 90806	Purpose of Disbursement Conference call expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX938
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Conference call expense
State: District:		

Full Name (Last, First, Middle Initial) c. Simple Toll Free		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2016
Mailing Address 430 E. Pacific Coast Highway		Amount of Each Disbursement this Period 3.55
City Long Beach	State CA	
Zip Code 90806	Purpose of Disbursement Conference call expenses	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX950
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Conference call expenses
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	23.78
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Simple Toll Free			Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2016
Mailing Address 430 E. Pacific Coast Highway			Amount of Each Disbursement this Period 6.03
City Long Beach	State CA	Zip Code 90806	
Purpose of Disbursement Conference call expenses		Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016	Transaction ID : SB17-EX954 Conference call expenses
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Simple Toll Free			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016
Mailing Address 430 E. Pacific Coast Highway			Amount of Each Disbursement this Period 7.59
City Long Beach	State CA	Zip Code 90806	
Purpose of Disbursement Conference call expenses		Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016	Transaction ID : SB17-EX1041 Conference call expenses
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Simple Toll Free			Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2016
Mailing Address 430 E. Pacific Coast Highway			Amount of Each Disbursement this Period 9.58
City Long Beach	State CA	Zip Code 90806	
Purpose of Disbursement Conference call expenses		Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016	Transaction ID : SB17-EX1047 Conference call expenses
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	23.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Simple Toll Free		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2016
Mailing Address 430 E. Pacific Coast Highway		Amount of Each Disbursement this Period 6.32
City Long Beach State CA Zip Code 90806	Purpose of Disbursement Conference call expenses 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : SB17-EX1055 Conference call expenses
State: District:		

Full Name (Last, First, Middle Initial) B. Acme Fresh Market		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2016
Mailing Address 116 West Streetsboro Street		Amount of Each Disbursement this Period 99.42
City Hudson State OH Zip Code 44236	Purpose of Disbursement Postage stamps 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : SB17-EX925 Postage stamps
State: District:		

Full Name (Last, First, Middle Initial) C. Acme Fresh Market		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016
Mailing Address 116 West Streetsboro Street		Amount of Each Disbursement this Period 392.00
City Hudson State OH Zip Code 44236	Purpose of Disbursement Postage stamps for petition mailing 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : SB17-EX939 Postage stamps for petition mailing
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	497.74
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 73 OF 133	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Acme Fresh Market		Date of Disbursement MM / DD / YYYY 02 / 17 / 2016
Mailing Address 116 West Streetsboro Street		Amount of Each Disbursement this Period 343.00
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Postage expense	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1038 Postage expense
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Acme Fresh Market		Date of Disbursement MM / DD / YYYY 02 / 24 / 2016
Mailing Address 116 West Streetsboro Street		Amount of Each Disbursement this Period 41.34
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Package shipping fees	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1075 Package shipping fees
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Acme Fresh Market		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address 116 West Streetsboro Street		Amount of Each Disbursement this Period 160.70
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Beer napkins cups paper towels for fundraiser	Category/Type 007	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1183 Beer napkins cups paper towels for fundraiser
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	545.04
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 74 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Acme Fresh Market		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016
Mailing Address 116 West Streetsboro Street		Amount of Each Disbursement this Period 282.02
City Hudson State OH Zip Code 44236	Purpose of Disbursement Wine cases of water soda paper towels for event	
Candidate Name	Category/Type 007	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1184 Wine cases of water soda paper towels for event
State: District:		

Full Name (Last, First, Middle Initial) B. Mercer County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016
Mailing Address 124 South Diamond Street		Amount of Each Disbursement this Period 400.00
City Mercer State PA Zip Code 16137	Purpose of Disbursement Full page ad and 4 Lincoln Dinner tickets	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX994 Full page ad and 4 Lincoln Dinner tickets
State: District:		

Full Name (Last, First, Middle Initial) C. Mercer County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2016
Mailing Address 124 South Diamond Street		Amount of Each Disbursement this Period 50.00
City Mercer State PA Zip Code 16137	Purpose of Disbursement Shared legislators program advertisement	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1003 Shared legislators program advertisement
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	732.02
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 75 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. GetGo #3500			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2016		
Mailing Address Route 8			Amount of Each Disbursement this Period 36.77		
City Butler	State PA	Zip Code 16001	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Fuel expense		Category/ Type 001	Transaction ID : SB17-EX928		
Candidate Name		Fuel expense			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. GetGo #3500			Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2016		
Mailing Address Route 8			Amount of Each Disbursement this Period 30.53		
City Butler	State PA	Zip Code 16001	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Fuel expense		Category/ Type 001	Transaction ID : SB17-EX935		
Candidate Name		Fuel expense			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. GetGo #3500			Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2016		
Mailing Address Route 8			Amount of Each Disbursement this Period 31.56		
City Butler	State PA	Zip Code 16001	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Fuel expense		Category/ Type 001	Transaction ID : SB17-EX958		
Candidate Name		Fuel expense			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	98.86
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 76 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. GetGo #3500		Date of Disbursement MM / DD / YYYY 02 / 10 / 2016
Mailing Address Route 8		Amount of Each Disbursement this Period 31.48
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Fuel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17-EX1049
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Fuel expense
State: District:		

Full Name (Last, First, Middle Initial) B. GetGo #3500		Date of Disbursement MM / DD / YYYY 03 / 16 / 2016
Mailing Address Route 8		Amount of Each Disbursement this Period 33.33
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Fuel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 002	Transaction ID : SB17-EX1164
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Fuel expense
State: District:		

Full Name (Last, First, Middle Initial) C. GetGo #3500		Date of Disbursement MM / DD / YYYY 03 / 22 / 2016
Mailing Address Route 8		Amount of Each Disbursement this Period 26.68
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Fuel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 002	Transaction ID : SB17-EX1174
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Fuel expense
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	91.49
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 77 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. GetGo #3500		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address Route 8		Amount of Each Disbursement this Period 35.59
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Fuel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1201 Fuel expense
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 01 / 19 / 2016
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 872.36
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food & beverage expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX937 Food & beverage expense
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 01 / 19 / 2016
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 224.04
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food & beverage expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX941 Food & beverage expense
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1131.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 02 / 17 / 2016
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 631.83
City Washington State DC Zip Code 20003	Purpose of Disbursement Food & beverage expense 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1061 Food & beverage expense
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 02 / 18 / 2016
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 165.71
City Washington State DC Zip Code 20003	Purpose of Disbursement Food & beverage expense 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1065 Food & beverage expense
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 03 / 17 / 2016
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 928.81
City Washington State DC Zip Code 20003	Purpose of Disbursement Food & beverage expenses 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1165 Food & beverage expenses
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1726.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 133			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 20d	<input type="checkbox"/> 19c 21

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016
Mailing Address 300 First Street SE			Amount of Each Disbursement this Period 115.65 <input type="checkbox"/> Memo Item
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Food & beverage expense		Category/ Type 001	Transaction ID : SB17-EX1168 Food & beverage expense
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. SCP Group			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016
Mailing Address 309 Penn Avenue			Amount of Each Disbursement this Period 57.07 <input type="checkbox"/> Memo Item
City Sharon	State PA	Zip Code 16146	
Purpose of Disbursement Shipping fees for letterhead envelopes		Category/ Type 001	Transaction ID : SB17-EX934 Shipping fees for letterhead envelopes
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. SCP Group			Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2016
Mailing Address 309 Penn Avenue			Amount of Each Disbursement this Period 1219.67 <input type="checkbox"/> Memo Item
City Sharon	State PA	Zip Code 16146	
Purpose of Disbursement Printing and mailing of direct mail solicitation		Category/ Type 001	Transaction ID : SB17-EX952 Printing and mailing of direct mail solicitation
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	1392.39
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 80 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. SCP Group		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 309 Penn Avenue		Amount of Each Disbursement this Period 928.22
City Sharon	State PA Zip Code 16146	
Purpose of Disbursement Printing of letterhead #10 envelopes #9 envelopes	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
State: District:	Category/Type 001	Transaction ID : SB17-EX1042 Printing of letterhead #10 envelopes #9 envelopes

Full Name (Last, First, Middle Initial) B. SCP Group		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 309 Penn Avenue		Amount of Each Disbursement this Period 783.57
City Sharon	State PA Zip Code 16146	
Purpose of Disbursement Printing	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
State: District:	Category/Type 001	Transaction ID : SB17-EX1096 Printing

Full Name (Last, First, Middle Initial) c. SCP Group		Date of Disbursement MM / DD / YYYY 02 / 26 / 2016
Mailing Address 309 Penn Avenue		Amount of Each Disbursement this Period 13.92
City Sharon	State PA Zip Code 16146	
Purpose of Disbursement Shipping fees	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
State: District:	Category/Type 001	Transaction ID : SB17-EX1077 Shipping fees

SUBTOTAL of Disbursements This Page (optional).....	1725.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 359.60
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Cellular phone expense	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX991 Cellular phone expense
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 361.93
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Cellular phone expenses	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX999 Cellular phone expenses
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2016
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 359.60
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Cellular phone expense	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1134 Cellular phone expense
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1081.13
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 82 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016
Mailing Address 9374 Route 14		Amount of Each Disbursement this Period 144.86
City Streetsboro	State PA	
Zip Code 44241	Purpose of Disbursement Printer ink cartridges	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : SB17-EX936 Printer ink cartridges
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2016
Mailing Address 9374 Route 14		Amount of Each Disbursement this Period 109.50
City Streetsboro	State PA	
Zip Code 44241	Purpose of Disbursement Labels Sharpies pens	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : SB17-EX953 Labels Sharpies pens
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address 9374 Route 14		Amount of Each Disbursement this Period 67.23
City Streetsboro	State PA	
Zip Code 44241	Purpose of Disbursement Printer ink cartridges	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : SB17-EX1117 Printer ink cartridges
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	321.59
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 83 OF 133			
	<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)
Mike Kelly For Congress

A. Staples

Full Name (Last, First, Middle Initial)
Mailing Address 9374 Route 14

City Streetsboro State PA Zip Code 44241

Purpose of Disbursement Office supplies: pens file folders

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 10 / 2016

Amount of Each Disbursement this Period: 29.66

Memo Item

Transaction ID : SB17-EX1153
Office supplies: pens file folders

B. Butler County Republican Committee

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2121

City Butler State PA Zip Code 16003

Purpose of Disbursement Dinner tickets for annual dinner

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 05 / 2016

Amount of Each Disbursement this Period: 400.00

Memo Item

Transaction ID : SB17-EX1100
Dinner tickets for annual dinner

C. Eastern Alliance Insurance Group

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 206

City East Petersburg State PA Zip Code 17520

Purpose of Disbursement Workers compensation insurance premium

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 28 / 2016

Amount of Each Disbursement this Period: 857.00

Memo Item

Transaction ID : SB17-EX1002
Workers compensation insurance premium

SUBTOTAL of Disbursements This Page (optional) 1286.66

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. LN Consulting		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 121 State Street		Amount of Each Disbursement this Period 4500.00 <input type="checkbox"/> Memo Item
City Harrisburg	State PA Zip Code 17101	
Purpose of Disbursement Digital campaign consulting (March & April 2016)	Category/Type 001	Transaction ID : SB17-EX1217 Digital campaign consulting (March & April 2016)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Carey Dunn Sirianni		Date of Disbursement MM / DD / YYYY 01 / 01 / 2016
Mailing Address PO Box 186		Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Memo Item
City Sewickley	State PA Zip Code 16143	
Purpose of Disbursement Fundraising consulting (January 2016)	Category/Type 001	Transaction ID : SB17-EX979 Fundraising consulting (January 2016)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Carey Dunn Sirianni		Date of Disbursement MM / DD / YYYY 01 / 29 / 2016
Mailing Address PO Box 186		Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Memo Item
City Sewickley	State PA Zip Code 16143	
Purpose of Disbursement Fundraising consulting (February 2016)	Category/Type 001	Transaction ID : SB17-EX997 Fundraising consulting (February 2016)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4500.00
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 85 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Carey Dunn Sirianni		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address PO Box 186		Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Memo Item
City Sewickley	State PA	
Zip Code 16143	Purpose of Disbursement Fundraising consulting (March 2016)	Transaction ID : SB17-EX1102 Fundraising consulting (March 2016)
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Carey Dunn Sirianni		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address PO Box 186		Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Memo Item
City Sewickley	State PA	
Zip Code 16143	Purpose of Disbursement Fundraising consulting (April 2016)	Transaction ID : SB17-EX1208 Fundraising consulting (April 2016)
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Amy Petraglia		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2016
Mailing Address 8623 Lexington Place		Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Memo Item
City Wexford	State PA	
Zip Code 15090	Purpose of Disbursement Fundraising consulting (January 2016)	Transaction ID : SB17-EX980 Fundraising consulting (January 2016)
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2250.00
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 86 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Amy Petraglia		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 8623 Lexington Place		Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Memo Item
City Wexford	State PA Zip Code 15090	
Purpose of Disbursement Fundraising consulting (February 2016)	Category/Type 001	Transaction ID : SB17-EX1008 Fundraising consulting (February 2016)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Amy Petraglia		Date of Disbursement MM / DD / YYYY 03 / 01 / 2016
Mailing Address 8623 Lexington Place		Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Memo Item
City Wexford	State PA Zip Code 15090	
Purpose of Disbursement	Category/Type 001	Transaction ID : SB17-EX1101 Administrative/Salary/Overhead Expenses
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Amy Petraglia		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 8623 Lexington Place		Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Memo Item
City Wexford	State PA Zip Code 15090	
Purpose of Disbursement Fundraising consulting (April 2016)	Category/Type 001	Transaction ID : SB17-EX1209 Fundraising consulting (April 2016)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2250.00
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 87 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Dr. Sous Custom Catering		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2016
Mailing Address 108 North Main Street		Amount of Each Disbursement this Period 399.50
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Petition event food & beverage expenses	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 007	Transaction ID : SB17-EX1000 Petition event food & beverage expenses
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Dr. Sous Custom Catering		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016
Mailing Address 108 North Main Street		Amount of Each Disbursement this Period 3107.35
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Food & beverage expenses at fundraising event	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 007	Transaction ID : SB17-EX1132 Food & beverage expenses at fundraising event
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. A-Link Printing		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2016
Mailing Address 3189 Washington Pike		Amount of Each Disbursement this Period 1133.16
City Bridgeville	State PA	
Zip Code 15017	Purpose of Disbursement Printing and mailing of invitation for 2/17 Pgh event	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX1004 Printing and mailing of invitation for 2/17 Pgh event
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4640.01
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 88 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. FedEx		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 270.10
City Hudson State OH Zip Code 44236	Purpose of Disbursement Photocopying of petitions Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : SB17-EX948 Photocopying of petitions

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 22.26
City Hudson State OH Zip Code 44236	Purpose of Disbursement Shipping expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : SB17-EX969 Shipping expense

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 36.08
City Hudson State OH Zip Code 44236	Purpose of Disbursement Petition printing & copy paper Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item Transaction ID : SB17-EX947 Petition printing & copy paper

SUBTOTAL of Disbursements This Page (optional).....	328.44
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. FedEx		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2016
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 55.37
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Shipping expense	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX970 Shipping expense
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2016
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 26.13
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Shipping fees	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1046 Shipping fees
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 50.14
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Shipping fees	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1066 Shipping fees
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	131.64
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 90 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. FedEx		Date of Disbursement MM / DD / YYYY 02 / 23 / 2016
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 25.57
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Shipping fees	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1071 Shipping fees
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement MM / DD / YYYY 03 / 02 / 2016
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 25.11
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Shipping expenses	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1110 Shipping expenses
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement MM / DD / YYYY 03 / 14 / 2016
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 34.14
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Shipping expense	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1187 Shipping expense
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	84.82
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 91 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. FedEx		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2016
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 24.92
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Shipping expense	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1188 Shipping expense
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2016
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 53.42
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Shipping expense	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1194 Shipping expense
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Eagle Printery		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016
Mailing Address 107 Bonnie Drive PO Box 550		Amount of Each Disbursement this Period 341.32
City Butler	State PA Zip Code 16002	
Purpose of Disbursement Printing of Butler petition signing event postcards	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX989 Printing of Butler petition signing event postcards
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	419.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. IRS Taxpayment		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2016
Mailing Address IRS Taxpayment		Amount of Each Disbursement this Period 1606.25 <input type="checkbox"/> Memo Item
City Philadelphia	State PA	
Purpose of Disbursement IRS taxpayment	Category/ Type 001	Transaction ID : SB17-EX1059 IRS taxpayment
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. IRS Taxpayment		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2016
Mailing Address IRS Taxpayment		Amount of Each Disbursement this Period 1414.23 <input type="checkbox"/> Memo Item
City Philadelphia	State PA	
Purpose of Disbursement IRS taxpayment	Category/ Type 001	Transaction ID : SB17-EX1060 IRS taxpayment
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. IRS Taxpayment		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address IRS Taxpayment		Amount of Each Disbursement this Period 842.23 <input type="checkbox"/> Memo Item
City Philadelphia	State PA	
Purpose of Disbursement Tax payment	Category/ Type 001	Transaction ID : SB17-EX1192 Tax payment
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3862.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement MM / DD / YYYY 03 / 22 / 2016	
Mailing Address 1601 Willow Road			Amount of Each Disbursement this Period 250.36	
City Menlo Park	State CA	Zip Code 94025	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Advertising expense		Category/ Type 001	Transaction ID : SB17-EX1191 Advertising expense	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. Printing Concepts			Date of Disbursement MM / DD / YYYY 01 / 19 / 2016	
Mailing Address 4982 Pacific Avenue			Amount of Each Disbursement this Period 50.00	
City Erie	State PA	Zip Code 16508	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Voter registration brochures		Category/ Type 001	Transaction ID : SB17-EX992 Voter registration brochures	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) c. Printing Concepts			Date of Disbursement MM / DD / YYYY 01 / 26 / 2016	
Mailing Address 4982 Pacific Avenue			Amount of Each Disbursement this Period 967.41	
City Erie	State PA	Zip Code 16508	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Voter registration brochures		Category/ Type 001	Transaction ID : SB17-EX990 Voter registration brochures	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional)	1267.77
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 94 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Printing Concepts		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address 4982 Pacific Avenue		Amount of Each Disbursement this Period 271.00
City Erie	State PA Zip Code 16508	
Purpose of Disbursement Printing voter registration forms	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
State: District:	Category/Type 001	Transaction ID : SB17-EX1207 Printing voter registration forms

Full Name (Last, First, Middle Initial) B. Duquesne Club		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2016
Mailing Address PO Box 387		Amount of Each Disbursement this Period 2108.81
City Pittsburgh	State PA Zip Code 15222	
Purpose of Disbursement Food & beverage expenses at fundraiser	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
State: District:	Category/Type 007	Transaction ID : SB17-EX1005 Food & beverage expenses at fundraiser

Full Name (Last, First, Middle Initial) c. Bradley Moore		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2016
Mailing Address 11597 Route 97 N		Amount of Each Disbursement this Period 500.00
City Waterford	State PA Zip Code 16441	
Purpose of Disbursement General campaign consulting (January 2016)	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
State: District:	Category/Type 001	Transaction ID : SB17-EX981 General campaign consulting (January 2016)

SUBTOTAL of Disbursements This Page (optional).....	2879.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Bradley Moore			Date of Disbursement MM / DD / YYYY 02 / 01 / 2016	
Mailing Address 11597 Route 97 N			Amount of Each Disbursement this Period 500.00	
City Waterford	State PA	Zip Code 16441	Memo Item <input type="checkbox"/>	
Purpose of Disbursement General campaign consulting (February 2016)		Category/ Type 001	Transaction ID : SB17-EX1012 General campaign consulting (February 2016)	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) B. Bradley Moore			Date of Disbursement MM / DD / YYYY 03 / 01 / 2016	
Mailing Address 11597 Route 97 N			Amount of Each Disbursement this Period 500.00	
City Waterford	State PA	Zip Code 16441	Memo Item <input type="checkbox"/>	
Purpose of Disbursement General campaign consulting (March 2016)		Category/ Type 001	Transaction ID : SB17-EX1103 General campaign consulting (March 2016)	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) c. Bradley Moore			Date of Disbursement MM / DD / YYYY 04 / 01 / 2016	
Mailing Address 11597 Route 97 N			Amount of Each Disbursement this Period 500.00	
City Waterford	State PA	Zip Code 16441	Memo Item <input type="checkbox"/>	
Purpose of Disbursement General campaign consulting (April 2016)		Category/ Type 001	Transaction ID : SB17-EX1210 General campaign consulting (April 2016)	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	1500.00
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 96 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Matthew Stroia		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2016
Mailing Address 3394 Mercer Road		Amount of Each Disbursement this Period 500.00
City New Castle	State PA	
Zip Code 16105	Purpose of Disbursement General campaign consulting (January 2016)	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17-EX982 General campaign consulting (January 2016)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Matthew Stroia		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016
Mailing Address 3394 Mercer Road		Amount of Each Disbursement this Period 500.00
City New Castle	State PA	
Zip Code 16105	Purpose of Disbursement General campaign consulting (February 2016)	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17-EX998 General campaign consulting (February 2016)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Matthew Stroia		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 3394 Mercer Road		Amount of Each Disbursement this Period 500.00
City New Castle	State PA	
Zip Code 16105	Purpose of Disbursement General campaign consulting (March 2016)	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17-EX1104 General campaign consulting (March 2016)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1500.00
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 97 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Matthew Stroia			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016	
Mailing Address 3394 Mercer Road			Amount of Each Disbursement this Period 500.00	
City New Castle	State PA	Zip Code 16105	Memo Item <input type="checkbox"/>	
Purpose of Disbursement General campaign consulting (April 2016)		Category/ Type 001	Transaction ID : SB17-EX1211 General campaign consulting (April 2016)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PNC Account - Main			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016	
Mailing Address 37 Main Street			Amount of Each Disbursement this Period 12.00	
City Hudson	State OH	Zip Code 44236	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Bank Service Charge		Category/ Type 001	Transaction ID : SB17-EX1193 Bank Service Charge	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. PNC Bank - Merchant Account			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address 37 Main Street			Amount of Each Disbursement this Period 69.39	
City Hudson	State OH	Zip Code 44236	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Bank Service Charge		Category/ Type 001	Transaction ID : SB17-EX921 Bank Service Charge	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	581.39
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 98 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. PNC Bank - Merchant Account		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 42.74
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Bank Service Charge	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX922 Bank Service Charge
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. PNC Bank - Merchant Account		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 17.66
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Bank Service Charge	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX923 Bank Service Charge
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. PNC Bank - Merchant Account		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 24.22
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Bank Service Charge	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1082 Bank Service Charge
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	84.62
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 99 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. PNC Bank - Merchant Account		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 22.94
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Bank Service Charge	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1083 Bank Service Charge
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. PNC Bank - Merchant Account		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 1.37
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Bank Service Charge	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1084 Bank Service Charge
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. PNC Bank - Merchant Account		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 31.36
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Bank Service Charge	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1136 Bank Service Charge
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	55.67
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 100 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. PNC Bank - Merchant Account		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 29.76
City Hudson	State OH	
Zip Code 44236	Purpose of Disbursement Bank Service Charge	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX1137 Bank Service Charge
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PNC Bank - Merchant Account		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 17.73
City Hudson	State OH	
Zip Code 44236	Purpose of Disbursement Bank Service Charge	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX1138 Bank Service Charge
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PNC Bank - Merchant Account		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 19.62
City Hudson	State OH	
Zip Code 44236	Purpose of Disbursement Bank Service Charge	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX1139 Bank Service Charge
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	67.11
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 101 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. PNC Bank - Merchant Account		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 21.11
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Bank Service Charge	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1140 Bank Service Charge
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. PNC Bank - Merchant Account		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 28.37
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Bank Service Charge	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1141 Bank Service Charge
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Meadville Fraternal Order Of Police		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016
Mailing Address PO Box 1341		Amount of Each Disbursement this Period 177.50
City Meadville	State PA Zip Code 16335	
Purpose of Disbursement Program advertising	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX987 Program advertising
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	226.98
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 102 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Armstrong County Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2016
Mailing Address 311 Franklin Avenue		Amount of Each Disbursement this Period 500.00
City Kittanning State PA Zip Code 16201	Purpose of Disbursement Petition breakfast donation & Lincoln Dinner tickets	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX977 Petition breakfast donation & Lincoln Dinner tickets
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. H2 Capital Consulting		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2016
Mailing Address 325 7th Street NW Suite 400		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20004	Purpose of Disbursement January 2016 fundraising consulting	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX985 January 2016 fundraising consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. H2 Capital Consulting		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016
Mailing Address 325 7th Street NW Suite 400		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20004	Purpose of Disbursement Fundraising consulting (February 2016)	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX1010 Fundraising consulting (February 2016)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5500.00
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 103 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. H2 Capital Consulting		Date of Disbursement MM / DD / YYYY 02 / 04 / 2016
Mailing Address 325 7th Street NW Suite 400		Amount of Each Disbursement this Period 20000.00 <input type="checkbox"/> Memo Item
City Washington State DC Zip Code 20004	Purpose of Disbursement Fundraising consulting - contractual bonus Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1015 Fundraising consulting - contractual bonus
State: District:		

Full Name (Last, First, Middle Initial) B. H2 Capital Consulting		Date of Disbursement MM / DD / YYYY 02 / 28 / 2016
Mailing Address 325 7th Street NW Suite 400		Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Memo Item
City Washington State DC Zip Code 20004	Purpose of Disbursement March 2016 fundraising consulting Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1001 March 2016 fundraising consulting
State: District:		

Full Name (Last, First, Middle Initial) c. H2 Capital Consulting		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 325 7th Street NW Suite 400		Amount of Each Disbursement this Period 51.45 <input type="checkbox"/> Memo Item
City Washington State DC Zip Code 20004	Purpose of Disbursement Reimbursement for taxi service (2/8/16) Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1213 Reimbursement for taxi service (2/8/16)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	22551.45
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 104 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. James Richardson		Date of Disbursement MM / DD / YYYY 02 / 17 / 2016
Mailing Address 21 Hodil Road		Amount of Each Disbursement this Period 157.50
City Grove City	State PA	
Zip Code 16127	Purpose of Disbursement Chocolate candy elephants for campaign events	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 007	Transaction ID : SB17-EX1020 Chocolate candy elephants for campaign events
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Lawrence Co. Republican Committee		Date of Disbursement MM / DD / YYYY 02 / 13 / 2016
Mailing Address 3015 Wilmington Road		Amount of Each Disbursement this Period 200.00
City New Castle	State PA	
Zip Code 16105	Purpose of Disbursement Petition signing event contribution	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17-EX1019 Petition signing event contribution
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Office Max		Date of Disbursement MM / DD / YYYY 02 / 22 / 2016
Mailing Address 905 Millcreek Mall		Amount of Each Disbursement this Period 135.25
City Erie	State PA	
Zip Code 16565	Purpose of Disbursement Ream of paper filer folders ink cartridge	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17-EX1070 Ream of paper filer folders ink cartridge
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	492.75
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 105 OF 133	
	<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)
Mike Kelly For Congress

A. PA Unemployment Compensation Tax

Full Name (Last, First, Middle Initial)
Mailing Address 651 Boas Street

City Harrisburg State PA Zip Code 17101

Purpose of Disbursement Unemployment compensation tax Category/Type 001

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement 01 / 27 / 2016

Amount of Each Disbursement this Period 3.85

Memo Item

Transaction ID : SB17-EX973
Unemployment compensation tax

B. PNC Bank - Online/Website Account

Full Name (Last, First, Middle Initial)
Mailing Address 37 Main Street

City Hudson State OH Zip Code 44236

Purpose of Disbursement Bank Service Charge Category/Type 001

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement 01 / 05 / 2016

Amount of Each Disbursement this Period 14.20

Memo Item

Transaction ID : SB17-EX920
Bank Service Charge

C. PNC Bank - Online/Website Account

Full Name (Last, First, Middle Initial)
Mailing Address 37 Main Street

City Hudson State OH Zip Code 44236

Purpose of Disbursement Bank Service Charge Category/Type 001

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement 01 / 15 / 2016

Amount of Each Disbursement this Period 1.45

Memo Item

Transaction ID : SB17-EX919
Bank Service Charge

SUBTOTAL of Disbursements This Page (optional) 19.50

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 106 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. PNC Bank - Online/Website Account		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 5.03
City Hudson	State OH	
Zip Code 44236	Purpose of Disbursement Bank Service Charge	<input type="checkbox"/> Memo Item
Candidate Name	001	Transaction ID : SB17-EX918
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Bank Service Charge
State: District:		

Full Name (Last, First, Middle Initial) B. PNC Bank - Online/Website Account		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 1.45
City Hudson	State OH	
Zip Code 44236	Purpose of Disbursement Bank Service Charge	<input type="checkbox"/> Memo Item
Candidate Name	001	Transaction ID : SB17-EX1078
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Bank Service Charge
State: District:		

Full Name (Last, First, Middle Initial) C. PNC Bank - Online/Website Account		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 10.95
City Hudson	State OH	
Zip Code 44236	Purpose of Disbursement Bank Service Charge	<input type="checkbox"/> Memo Item
Candidate Name	001	Transaction ID : SB17-EX1079
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Bank Service Charge
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	17.43
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 107 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial)
A. PNC Bank - Online/Website Account

Mailing Address 37 Main Street

City Hudson State OH Zip Code 44236

Purpose of Disbursement Bank Service Charge Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 25 / 2016

Amount of Each Disbursement this Period: 1.14

Memo Item

Transaction ID : SB17-EX1080
Bank Service Charge

Full Name (Last, First, Middle Initial)
B. PNC Bank - Online/Website Account

Mailing Address 37 Main Street

City Hudson State OH Zip Code 44236

Purpose of Disbursement Bank Service Charge Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 29 / 2016

Amount of Each Disbursement this Period: 3.20

Memo Item

Transaction ID : SB17-EX1081
Bank Service Charge

Full Name (Last, First, Middle Initial)
C. PNC Bank - Online/Website Account

Mailing Address 37 Main Street

City Hudson State OH Zip Code 44236

Purpose of Disbursement Bank Service Charge Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 01 / 2016

Amount of Each Disbursement this Period: 27.95

Memo Item

Transaction ID : SB17-EX1143
Bank Service Charge

SUBTOTAL of Disbursements This Page (optional) 32.29

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 108 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. PNC Bank - Online/Website Account		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 37 Main Street		Amount of Each Disbursement this Period 4.60
City Hudson State OH Zip Code 44236	Purpose of Disbursement Bank Service Charge <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 001	Transaction ID : SB17-EX1142 Bank Service Charge
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Morton's The Steakhouse		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 1050 Connecticut Ave NW #2		Amount of Each Disbursement this Period 169.35
City Washington State DC Zip Code 20036	Purpose of Disbursement Food & beverage expenses <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 001	Transaction ID : SB17-EX1109 Food & beverage expenses
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. Kwik Fill		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address 300 East Main Street		Amount of Each Disbursement this Period 24.30
City Evans City State PA Zip Code 16033	Purpose of Disbursement Fuel expense <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 002	Transaction ID : SB17-EX1062 Fuel expense
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	198.25
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 109 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. The Mansion		Date of Disbursement MM / DD / YYYY 02 / 04 / 2016
Mailing Address 151 Mansion Lane		Amount of Each Disbursement this Period 750.00
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Facility rental for 3/31 fundraising event	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 007	Transaction ID : SB17-EX1013 Facility rental for 3/31 fundraising event
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Vanco Payment Solutions		Date of Disbursement MM / DD / YYYY 03 / 08 / 2016
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 55.45
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit card processing fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX1145 Credit card processing fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Vanco Payment Solutions		Date of Disbursement MM / DD / YYYY 03 / 14 / 2016
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 35.45
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit card processing fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX1150 Credit card processing fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	840.90
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 110 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Vanco Payment Solutions		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 14.20
City State Zip Code Minnetonka MN 55343	Purpose of Disbursement Credit card processing fees 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1147 Credit card processing fees
State: District:		

Full Name (Last, First, Middle Initial) B. Vanco Payment Solutions		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2016
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 1.33
City State Zip Code Minnetonka MN 55343	Purpose of Disbursement Credit card processing fees 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1148 Credit card processing fees
State: District:		

Full Name (Last, First, Middle Initial) c. Vanco Payment Solutions		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 14.08
City State Zip Code Minnetonka MN 55343	Purpose of Disbursement Credit card processing fees 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1149 Credit card processing fees
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	29.61
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 111 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Sheetz-Butler		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 249 Pittsburgh Road		Amount of Each Disbursement this Period 31.81
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Fuel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : SB17-EX1057
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Fuel expense
State: District:		

Full Name (Last, First, Middle Initial) B. Sheetz-Butler		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 249 Pittsburgh Road		Amount of Each Disbursement this Period 24.68
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Fuel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : SB17-EX1058
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Fuel expense
State: District:		

Full Name (Last, First, Middle Initial) c. Sheetz-Butler		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 249 Pittsburgh Road		Amount of Each Disbursement this Period 27.16
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Fuel expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : SB17-EX1197
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Fuel expense
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	83.65
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 112 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Sheetz-Butler		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address 249 Pittsburgh Road		Amount of Each Disbursement this Period 9.45
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Bagged ice for fundraising event	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 007	Transaction ID : SB17-EX1200
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Bagged ice for fundraising event
State: District:		

Full Name (Last, First, Middle Initial) B. Dubliner Restaurant		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address 4 F Street NW		Amount of Each Disbursement this Period 265.35
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Food & beverage expenses	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX1113
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Food & beverage expenses
State: District:		

Full Name (Last, First, Middle Initial) c. Crawford County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2016
Mailing Address 10990 Livermore Road		Amount of Each Disbursement this Period 200.00
City Meadville	State PA	
Zip Code 16335	Purpose of Disbursement Petition signing event donation	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX1018
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Petition signing event donation
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	474.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Crawford County Republican Party			Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2016	
Mailing Address 10990 Livermore Road			Amount of Each Disbursement this Period 60.00	
City Meadville	State PA	Zip Code 16335	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Program ad for spring dinner		Category/ Type 001	Transaction ID : SB17-EX1135 Program ad for spring dinner	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. Crawford County Republican Party			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016	
Mailing Address 10990 Livermore Road			Amount of Each Disbursement this Period 60.00	
City Meadville	State PA	Zip Code 16335	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Spring dinner tickets - 2		Category/ Type 001	Transaction ID : SB17-EX1216 Spring dinner tickets - 2	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) c. Buhl Park Corporation			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016	
Mailing Address 715 Hazen Road			Amount of Each Disbursement this Period 250.00	
City Hermitage	State PA	Zip Code 16148	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Armed Forces Day Sponsorship/Advertising		Category/ Type 004	Transaction ID : SB17-EX1214 Armed Forces Day Sponsorship/Advertising	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	370.00
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 114 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Delta Air		Date of Disbursement MM / DD / YYYY 02 / 08 / 2016
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 497.20
City Atlanta	State GA Zip Code 30354	
Purpose of Disbursement Airline tickets from Pgh to FL	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
State: District:	Category/Type 002	Transaction ID : SB17-EX1085 Airline tickets from Pgh to FL

Full Name (Last, First, Middle Initial) B. Delta Air		Date of Disbursement MM / DD / YYYY 02 / 08 / 2016
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 497.20
City Atlanta	State GA Zip Code 30354	
Purpose of Disbursement Airline tickets from Pgh to FL	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
State: District:	Category/Type 002	Transaction ID : SB17-EX1086 Airline tickets from Pgh to FL

Full Name (Last, First, Middle Initial) C. Delta Air		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 50.00
City Atlanta	State GA Zip Code 30354	
Purpose of Disbursement Baggage fees	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
State: District:	Category/Type 002	Transaction ID : SB17-EX1090 Baggage fees

SUBTOTAL of Disbursements This Page (optional).....	1044.40
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 115 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 386.60
City Atlanta	State GA Zip Code 30354	
Purpose of Disbursement Airline tickets	Category/Type 002	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1091 Airline tickets
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 386.60
City Atlanta	State GA Zip Code 30354	
Purpose of Disbursement Airline tickets	Category/Type 002	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1092 Airline tickets
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 530.60
City Atlanta	State GA Zip Code 30354	
Purpose of Disbursement Airline tickets	Category/Type 002	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1111 Airline tickets
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1303.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 530.60
City Atlanta	State GA Zip Code 30354	
Purpose of Disbursement Airline tickets	Category/Type 002	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1112 Airline tickets
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 25.00
City Atlanta	State GA Zip Code 30354	
Purpose of Disbursement Baggage fee	Category/Type 002	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1123 Baggage fee
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 60.00
City Atlanta	State GA Zip Code 30354	
Purpose of Disbursement Baggage fee	Category/Type 002	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1124 Baggage fee
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	615.60
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 117 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2016
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 25.00
City Atlanta State GA Zip Code 30354	Purpose of Disbursement Baggage fee	
Candidate Name	Category/Type 002	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1129 Baggage fee
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Air		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2016
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 60.00
City Atlanta State GA Zip Code 30354	Purpose of Disbursement Baggage fee	
Candidate Name	Category/Type 002	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1130 Baggage fee
State: District:		

Full Name (Last, First, Middle Initial) c. Lido Beach Resort		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2016
Mailing Address 700 Ben Franklin Drive		Amount of Each Disbursement this Period 901.76
City Sarasota State FL Zip Code 34236	Purpose of Disbursement Hotel expenses	
Candidate Name	Category/Type 002	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1158 Hotel expenses
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	986.76
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 118 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Hickory Bar & Grille			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2016
Mailing Address 1645 N. Hermitage Road			Amount of Each Disbursement this Period 42.20 <input type="checkbox"/> Memo Item
City Hermitage	State PA	Zip Code 16148	
Purpose of Disbursement Food & beverage expense		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17-EX959 Food & beverage expense	
State: District:			

Full Name (Last, First, Middle Initial) B. Grove City Country Club			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016
Mailing Address 73 Country Club Road			Amount of Each Disbursement this Period 1340.00 <input type="checkbox"/> Memo Item
City Grove City	State PA	Zip Code 16127	
Purpose of Disbursement Food & beverage expenses for HAP event		Candidate Name	Category/ Type 007
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17-EX1036 Food & beverage expenses for HAP event	
State: District:			

Full Name (Last, First, Middle Initial) C. Pittsburgh Steelers			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 100 Art Rooney Avenue			Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Memo Item
City Pittsburgh	State PA	Zip Code 15212	
Purpose of Disbursement Fee to reserve box seats at future game		Candidate Name	Category/ Type 007
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17-EX1069 Fee to reserve box seats at future game	
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1882.00
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 119 OF 133			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 20d				

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. US Postal Service		Date of Disbursement MM / DD / YYYY 01 / 07 / 2016
Mailing Address 345 South Main Street		Amount of Each Disbursement this Period 2.74
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Postage expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX927
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Postage expense
State: District:		

Full Name (Last, First, Middle Initial) B. US Postal Service		Date of Disbursement MM / DD / YYYY 01 / 13 / 2016
Mailing Address 345 South Main Street		Amount of Each Disbursement this Period 1023.47
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Postage for Butler petition signing event postcard	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX988
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Postage for Butler petition signing event postcard
State: District:		

Full Name (Last, First, Middle Initial) C. US Postal Service		Date of Disbursement MM / DD / YYYY 02 / 10 / 2016
Mailing Address 345 South Main Street		Amount of Each Disbursement this Period 51.00
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement PO Box rental renewal fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX1033
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PO Box rental renewal fee
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1077.21
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 120 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. US Postal Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 345 South Main Street		Amount of Each Disbursement this Period 75.00
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Business reply box fund replenishment	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17-EX1106 Business reply box fund replenishment
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US Postal Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address 345 South Main Street		Amount of Each Disbursement this Period 6.80
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Postage expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17-EX1120 Postage expense
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. US Postal Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 345 South Main Street		Amount of Each Disbursement this Period 8.44
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Postage expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17-EX1162 Postage expense
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	90.24
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 121 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. US Postal Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2016
Mailing Address 345 South Main Street		Amount of Each Disbursement this Period 6.80
City Butler	State PA		☐ Memo Item Transaction ID : SB17-EX1179 Postage expense
Purpose of Disbursement Postage expense		Category/ Type 001
Candidate Name			Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:

Full Name (Last, First, Middle Initial) B. Fairfield Inn & Suites		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2016
Mailing Address 200 Fairfield Lane		Amount of Each Disbursement this Period 100.99
City Butler	State PA		☐ Memo Item Transaction ID : SB17-EX1172 Hotel expense
Purpose of Disbursement Hotel expense		Category/ Type 002
Candidate Name			Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:

Full Name (Last, First, Middle Initial) c. Sonoma Restaurant		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address 223 Pennsylvania Ave SE		Amount of Each Disbursement this Period 845.46
City Washington	State DC		☐ Memo Item Transaction ID : SB17-EX1175 Food & beverage expense
Purpose of Disbursement Food & beverage expense		Category/ Type 001
Candidate Name			Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:

SUBTOTAL of Disbursements This Page (optional).....	953.25
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 122 OF 133			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. US Postal Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016
Mailing Address 68 Ravenna Street		Amount of Each Disbursement this Period 251.28
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Shipping expenses and stamps	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1155 Shipping expenses and stamps
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Sarasota Yacht Club		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2016
Mailing Address 1100 John Ringling Blvd.		Amount of Each Disbursement this Period 2747.95
City Sarasota	State FL Zip Code 34236	
Purpose of Disbursement Food & beverage expenses at fundraisers	Category/Type 007	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1098 Food & beverage expenses at fundraisers
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Erie Club		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address 524 Peach Street		Amount of Each Disbursement this Period 278.39
City Erie	State PA Zip Code 16501	
Purpose of Disbursement Food & beverage expenses	Category/Type 007	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1063 Food & beverage expenses
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	3277.62
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 123 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Consol Energy Center		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016
Mailing Address 1001 Fifth Avenue		Amount of Each Disbursement this Period 3780.00
City Pittsburgh	State PA	
Zip Code 15219	Purpose of Disbursement Tickets for concert fundraiser	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX929 Tickets for concert fundraiser
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Consol Energy Center		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016
Mailing Address 1001 Fifth Avenue		Amount of Each Disbursement this Period 956.59
City Pittsburgh	State PA	
Zip Code 15219	Purpose of Disbursement Food & beverage expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX940 Food & beverage expense
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Consol Energy Center		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016
Mailing Address 1001 Fifth Avenue		Amount of Each Disbursement this Period 188.08
City Pittsburgh	State PA	
Zip Code 15219	Purpose of Disbursement Food & beverage expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17-EX943 Food & beverage expense
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	4924.67
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 124 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Pro-life Of Mercer County		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016
Mailing Address PO Box 885		Amount of Each Disbursement this Period 230.00
City Sharon	State PA	Zip Code 16146
Purpose of Disbursement Program advertisement and breakfast tickets	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Transaction ID : SB17-EX993 Program advertisement and breakfast tickets	

Full Name (Last, First, Middle Initial) B. Central Michel Richard		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016
Mailing Address 1001 Pennsylvania Ave NW		Amount of Each Disbursement this Period 1771.94
City Washington	State DC	Zip Code 20004
Purpose of Disbursement Food & beverage expenses	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Transaction ID : SB17-EX1044 Food & beverage expenses	

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address American Airlines		Amount of Each Disbursement this Period 353.60
City WWW.AA.COM	State	Zip Code
Purpose of Disbursement Airline tickets	Category/Type 002	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Transaction ID : SB17-EX1093 Airline tickets	

SUBTOTAL of Disbursements This Page (optional)	2355.54
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 125 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address American Airlines		Amount of Each Disbursement this Period 353.60 <input type="checkbox"/> Memo Item
City WWW.AA.COM	State Zip Code	
Purpose of Disbursement Airline tickets	Category/Type 002	Transaction ID : SB17-EX1094 Airline tickets
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US Postmaster		Date of Disbursement MM / DD / YYYY 03 / 04 / 2016
Mailing Address US Postmaster		Amount of Each Disbursement this Period 226.87 <input type="checkbox"/> Memo Item
City Pittsburgh	State PA Zip Code 15017	
Purpose of Disbursement Postage for 2/17 event invitations	Category/Type 001	Transaction ID : SB17-EX1105 Postage for 2/17 event invitations
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Best Food Forward Advertising		Date of Disbursement MM / DD / YYYY 03 / 28 / 2016
Mailing Address 756 Pine Street		Amount of Each Disbursement this Period 481.50 <input type="checkbox"/> Memo Item
City Meadville	State PA Zip Code 16335	
Purpose of Disbursement Campaign material: mirrors with campaign logo	Category/Type 006	Transaction ID : SB17-EX1133 Campaign material: mirrors with campaign logo
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1061.97
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 126 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Bobby Van's		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 1201 New York Avenue NW		Amount of Each Disbursement this Period 270.40
City Washington State DC Zip Code 20005	Purpose of Disbursement Food & beverage expenses	
Candidate Name	Category/Type 001	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1151 Food & beverage expenses
State: District:		

Full Name (Last, First, Middle Initial) B. Bobby Van's		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2016
Mailing Address 1201 New York Avenue NW		Amount of Each Disbursement this Period 270.40
City Washington State DC Zip Code 20005	Purpose of Disbursement Food & beverage expenses/breakfast meeting	
Candidate Name	Category/Type 007	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1167 Food & beverage expenses/breakfast meeting
State: District:		

Full Name (Last, First, Middle Initial) c. Owen's Fish Camp		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016
Mailing Address 516 Burns Lane		Amount of Each Disbursement this Period 253.68
City Sarasota State FL Zip Code 34236	Purpose of Disbursement Food & beverage expenses	
Candidate Name	Category/Type 002	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX1156 Food & beverage expenses
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	794.48
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 127 OF 133	
	<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)
Mike Kelly For Congress

A. All About Reclaimed

Full Name (Last, First, Middle Initial)
Mailing Address 109 N. Main Street

City Butler State PA Zip Code 16001

Purpose of Disbursement Flowers for campaign event

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 01 / 2016

Amount of Each Disbursement this Period: 269.00

Memo Item

Transaction ID : SB17-EX1199
Flowers for campaign event

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional) 269.00

TOTAL This Period (last page this line number only) 110508.80

**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 128 OF 133	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Friends Of The NRA		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2016
Mailing Address 100 Wycliffe Way		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Event ticket/contribution	Transaction ID : SB21-EX1097 Event ticket/contribution
Candidate Name	Category/Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Friends Of Pat Toomey		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2016
Mailing Address 1180 Welsh Road Suite 100		Amount of Each Disbursement this Period 4000.00 <input type="checkbox"/> Memo Item
City North Wales	State PA	
Zip Code 19454	Purpose of Disbursement Political contribution	Transaction ID : SB21-EX984 Political contribution
Candidate Name	Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

SUBTOTAL of Disbursements This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00

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 : SC10-LN1

Mike Kelly For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
George J Jr J. Kelly Jr.

Election: 2010
 Primary
 General
 Other (specify) ▼

Mailing Address
239 W Pearl Street

City State ZIP Code
Butler PA 16001

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
36500.00 .00 36500.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 09 / D 30 / Y 2010 M 12 / D 31 / Y 2050 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)..... ▶ 36500.00
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)
Mike Kelly For Congress

Transaction ID : **SC10-LN2**

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
George J Jr J. Kelly Jr.

Election: 2010
 Primary
 General
 Other (specify) ▼

Mailing Address
239 W Pearl Street

City State ZIP Code
Butler PA 16001

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
75000.00 .00 75000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 06 / D 30 / Y 2010 M 12 / D 31 / Y 2050 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)..... ▶ 75000.00
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) **Transaction ID : SC10-LN3**
Mike Kelly For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
George J Jr J. Kelly Jr.

Election: 2010
 Primary
 General
 Other (specify) ▼

Mailing Address
 239 W Pearl Street

City State ZIP Code
 Butler PA 16001

Original Amount of Loan 25000.00	Cumulative Payment To Date .00	Balance Outstanding at Close of This Period 25000.00
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TERMS

Date Incurred: M 05 / D 12 / Y 2010
 Date Due: M 12 / D 31 / Y 2050
 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)..... ▶ 25000.00

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)
Mike Kelly For Congress

Transaction ID : **SC10-LN4**

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
George J Jr J. Kelly Jr.

Election: 2010
 Primary
 General
 Other (specify) ▼

Mailing Address
239 W Pearl Street

City State ZIP Code
Butler PA 16001

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
100000.00 .00 100000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 07 / Y 2010 M 12 / D 31 / Y 2050 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)..... ▶ 100000.00
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) **Transaction ID : SC10-LN5**
Mike Kelly For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) PERSONAL FUNDS <input type="checkbox"/> Memo Item George J Jr J. Kelly Jr. Mailing Address 239 W Pearl Street	Election: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
--	---

City	State	ZIP Code
Butler	PA	16001

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
43495.00	2000.00	41495.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 31 / Y 2010	M 12 / D 31 / Y 2050	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) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	41495.00
TOTALS This Period (last page in this line only).....	277995.00

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