

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

| | | | |
|--|--|---|--|
| 1. NAME OF COMMITTEE IN FULL RYAN COSTELLO FOR CONGRESS | | | |
| ADDRESS (number and street) PO Box 3154 | | | |
| CITY West Chester | | STATE PA | ZIP CODE 19381-3154 |
| 2. NAME OF CANDIDATE Costello, Ryan A, , , | | 3. OFFICE SOUGHT (State and District) House PA 06 | |
| 4. FEC IDENTIFICATION NUMBER C00554899 | | | |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ | | | |
| A. FULL NAME Johnson, Scott, , , | | | |
| MAILING ADDRESS 102 Oscar Way | | Name of Employer J Tech Inc | |
| CITY Chester Springs | | STATE PA | ZIP CODE 19425-9540 |
| | | Occupation President | |
| | | Transaction ID : 6B489886696354D8D | |
| | | Date (month, day, year) 10/25/2016 | Amount 1000.00 |
| B. FULL NAME Bentley, Richard, , , | | | |
| MAILING ADDRESS 2039 Saint Peters Rd | | Name of Employer Videoray LLC | |
| CITY Pottstown | | STATE PA | ZIP CODE 19465-7110 |
| | | Occupation Owner | |
| | | Transaction ID : 644CE3BFF75274BCI | |
| | | Date (month, day, year) 10/25/2016 | Amount 2100.00 |
| C. FULL NAME Willner, Sherrie, , , | | | |
| MAILING ADDRESS 1301 Prospect Hill Rd | | Name of Employer Homemaker | |
| CITY Villanova | | STATE PA | ZIP CODE 19085-2116 |
| | | Occupation Homemaker | |
| | | Transaction ID : 62C70B4C619F04074 | |
| | | Date (month, day, year) 10/25/2016 | Amount 1000.00 |
| D. FULL NAME Believe In Life Liberty Yourself Aka Billy PAC | | | |
| MAILING ADDRESS 3246 E Ridgeview St | | Name of Employer | |
| CITY Springfield | | STATE MO | ZIP CODE 65804-4076 |
| | | Occupation | |
| | | Transaction ID : 6E637C01714914F0E | |
| | | Date (month, day, year) 10/25/2016 | Amount 1000.00 |
| E. FULL NAME Humane Society Legislative Fund Political Action Committee | | | |
| MAILING ADDRESS 519 C Street NE | | Name of Employer | |
| CITY Washington | | STATE DC | ZIP CODE 20002-5809 |
| | | Occupation | |
| | | Transaction ID : 62B849E7B461F441E | |
| | | Date (month, day, year) 10/25/2016 | Amount 3000.00 |
| SIGNATURE (optional) DEXTER, LINDA, , , | | DATE 10/26/2016 | For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100 |
| [Electronically Filed] | | | |

| | | |
|--|--|--|
| | | |
|--|--|--|

Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

| | | |
|---|---|--|
| 1. NAME OF COMMITTEE IN FULL RYAN COSTELLO FOR CONGRESS | | |
| ADDRESS (number and street) PO Box 3154 | | |
| CITY, STATE, and ZIP CODE West Chester PA 19381-3154 | | |
| 2. NAME OF CANDIDATE Costello, Ryan A, , , | 3. OFFICE SOUGHT (State and District) House PA 06 | 4. FEC IDENTIFICATION NUMBER C00554899 |

continuation page

5. IS THIS AN AMENDMENT?
 NO, THIS IS A NEW FILING
 YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____

| A. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer | Date (month, day, year) | Amount |
|---|---|-------------------------|---------|
| Allstate Insurance Company PAC 2775 Sanders Rd Ste A2W Northbrook IL 60062-6110 | Transaction ID : 6A4E6FCAC3AB64624855 Occupation | 10/25/2016 | 1500.00 |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE General Electric Company Political Action Committee (GEPAC) 1299 PENNSYLVANIA AVE NW SUITE 900 WASHINGTON DC 20004 | Transaction ID : 6F1F4530DFC9443FA980 Occupation | 10/26/2016 | 2500.00 |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE THE SCHWAN FOOD COMPANY POLITICAL ACTION COMMITTEE 115 WEST COLLEGE DRIVE MARSHALL MN 56258 | Transaction ID : 6717C234CB68544279D1 Occupation | 10/26/2016 | 2000.00 |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE Fidelity National Financial INC PAC 2001 601 Riverside Ave Jacksonville FL 32204-2901 | Transaction ID : 6062F154594D54011A19 Occupation | 10/26/2016 | 1000.00 |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE Healthsouth Corporation PAC 3660 Grandview Pkwy Ste 200 Birmingham AL 35243-3332 | Transaction ID : 676665D1D0AB74FD4A51 Occupation | 10/26/2016 | 2000.00 |

Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

| | | | |
|--|--|--|-----------------------|
| 1. NAME OF COMMITTEE IN FULL RYAN COSTELLO FOR CONGRESS | | continuation page | |
| ADDRESS (number and street) PO Box 3154 | | | |
| CITY, STATE, and ZIP CODE West Chester PA 19381-3154 | | | |
| 2. NAME OF CANDIDATE Costello, Ryan A, , , | 3. OFFICE SOUGHT (State and District) House PA 06 | 4. FEC IDENTIFICATION NUMBER C00554899 | |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ | | | |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE Patriots Leading a Majority 50 S Providence Rd Media PA 19063-3531 | Name of Employer Occupation Transaction ID : 6D63D3E76462442FB948 | Date (month, day, year) 10/26/2016 | Amount 1500.00 |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer Occupation | Date (month, day, year) | Amount |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer Occupation | Date (month, day, year) | Amount |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer Occupation | Date (month, day, year) | Amount |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer Occupation | Date (month, day, year) | Amount |