

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
Doyle for Congress Committee

ADDRESS (number and street) 205 Hawthorne Court
Check if different than previously reported. (ACC) Pittsburgh PA 15221

2. FEC IDENTIFICATION NUMBER C C00290064
3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT PA 14

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
Termination Report (TER)

(b) 12-Day PRE-Election Report for the:
Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day POST-Election Report for the:
General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 10 / 01 / 2013 through M M / D D / Y Y Y Y 12 / 31 / 2013

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 Karen S. Oleyar

Signature of Treasurer Karen S. Oleyar [Electronically Filed] Date M M / D D / Y Y Y Y 01 / 12 / 2014

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 grid and FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Doyle for Congress Committee**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2013 To: M M / D D / Y Y Y Y 12 / 31 / 2013

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	87396.00	384498.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	87396.00	383498.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	52325.49	237297.53
(b) Total Offsets to Operating Expenditures (from Line 14).....	551.78	1906.78
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	51773.71	235390.75
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	335741.78	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**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

**Doyle for Congress Committee**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	21200.00	83350.00
(ii) Unitemized.....	196.00	898.00
(iii) TOTAL of contributions from individuals ▶	21396.00	84248.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	66000.00	300250.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	87396.00	384498.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	551.78	1906.78
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	233.06	357.46
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	88180.84	386762.24

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	52325.49	237297.53
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1000.00
21. OTHER DISBURSEMENTS .....	14275.00	60835.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	66600.49	299132.53

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	314161.43
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	88180.84
25. SUBTOTAL (add Line 23 and Line 24).....	402342.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	66600.49
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	335741.78

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

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

FOR LINE NUMBER: PAGE 5 OF 86  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Doyle for Congress Committee**

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

Mailing Address 1080 Shady Avenue

City Pittsburgh State PA Zip Code 15232

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

Name of Employer A.L.D. Law Firm Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : 40107.C10560**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address 5540 Dunmoyle Avenue

City Pittsburgh State PA Zip Code 15217

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

Name of Employer Aloe Brojthers LLC Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 07 / 2013

**Transaction ID : 31116.C10515**

Amount of Each Receipt this Period  
 Receipt 300.00

**C.** Full Name (Last, First, Middle Initial)  
**G. Nicholas Beckwith III**

Mailing Address 1 Little Lane

City Pittsburgh State PA Zip Code 15215-1552

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

Name of Employer Arch Street Management Occupation Business Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 07 / 2013

**Transaction ID : 31116.C10512**

Amount of Each Receipt this Period  
 Receipt 300.00

**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 6 OF 86
	<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)  
**Doyle for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Elaine M. Bellin**

Mailing Address 109 Nantucket Drive

City Pittsburgh State PA Zip Code 15238

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

Name of Employer Paragon Foods Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10494**

Amount of Each Receipt this Period  
 Receipt 300.00

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

Mailing Address 1121 Shady Avenue

City Pittsburgh State PA Zip Code 15232

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

Name of Employer National Apt. Laundries Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : 40107.C10554**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address 1304 N. Sheridan Avenue

City Pittsburgh State PA Zip Code 15206

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

Name of Employer Urban League of Great. Pgh Occupation President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 01 / 2013

**Transaction ID : 40107.C10531**

Amount of Each Receipt this Period  
 Receipt 300.00

**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 7 OF 86
	<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)  
**Doyle for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Helen Hanna Casey**

Mailing Address 14 W Woodland Road

City Pittsburgh State PA Zip Code 15232

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

Name of Employer Howard Hanna Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10484**

Amount of Each Receipt this Period  
**500.00**

Receipt

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

Mailing Address 14 W. Woodland Rd.

City Pittsburgh State PA Zip Code 15232

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

Name of Employer Stephen Casey Architects Occupation Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2013

**Transaction ID : 31116.C10514**

Amount of Each Receipt this Period  
**500.00**

Receipt

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

Mailing Address 2205 Hassinger Lane

City Glenshaw State PA Zip Code 15116

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

Name of Employer Howard Hanna Occupation Real Estate Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10488**

Amount of Each Receipt this Period  
**300.00**

Receipt

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

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

**1300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 86
	<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)  
**Doyle for Congress Committee**

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

Mailing Address 606 Woodvalley Rd.

City Pittsburgh State PA Zip Code 15238

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

Name of Employer QC Lacrosse Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10487**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address 303 Wildberry Rd

City Pittsburgh State PA Zip Code 15238

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

Name of Employer Carnegie Mellon University Occupation General Counsel

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10489**

Amount of Each Receipt this Period  
 Receipt 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Steven G. Docimo, MD**

Mailing Address 922 W. Waldheim Rd.

City Pittsburgh State PA Zip Code 15215

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

Name of Employer UPMC Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10503**

Amount of Each Receipt this Period  
 Receipt 500.00

**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 9 OF 86
	<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)  
**Doyle for Congress Committee**

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

Mailing Address 6630 Forest Glen Rd.

City Pittsburgh State PA Zip Code 15217

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

Name of Employer Self Occupation investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : 40107.C10558**

Amount of Each Receipt this Period  
 Receipt 500.00

**B.** Full Name (Last, First, Middle Initial)  
**James Clifford Forrest III**

Mailing Address 3 Colbert Lane

City Pittsburgh State PA Zip Code 15215-1509

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

Name of Employer Rosebud Mining Co. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10498**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address c/o The Beechwood Co.  
Suite 850, 1001 Liberty Avenue

City Pittsburgh State PA Zip Code 15222-3716

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

Name of Employer Reed Smith LLP Occupation Associate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 07 / 2013

**Transaction ID : 31116.C10513**

Amount of Each Receipt this Period  
 Receipt 500.00

**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 10 OF 86
	<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)  
**Doyle for Congress Committee**

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

Mailing Address 5133 Karrington Drive

City State Zip Code  
Gibsonia PA 15044-6008

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

Name of Employer Occupation  
Childrens Hospital of PGH COO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10502**

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 1445 Bennington Dt.

City State Zip Code  
Pittsburgh PA 15217

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

Name of Employer Occupation  
Self Real Estate Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : 40107.C10556**

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 114 Woodland Road

City State Zip Code  
Pittsburgh PA 15232

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

Name of Employer Occupation  
J.J. Gumberg Co. V. Chm. & COO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10506**

Amount of Each Receipt this Period  
500.00

Receipt

**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 11 OF 86
	<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)  
**Doyle for Congress Committee**

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

Mailing Address 3705 Gleneagle Drive

City Murrysville State PA Zip Code 15668

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

Name of Employer Howard Hanna Occupation realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10493**

Amount of Each Receipt this Period  
 Receipt 300.00

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

Mailing Address 1001 W. Waldheim Road

City Pittsburgh State PA Zip Code 15215

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

Name of Employer Howard Hanna Real Estate Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10508**

Amount of Each Receipt this Period  
 Receipt 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Howard W. Hanna, Jr.**

Mailing Address 505 Grandview Drive

City Verona State PA Zip Code 15147

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

Name of Employer Howard Hanna Real Estate Occupation R.E. Development

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10491**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

2300.00

**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 86
	<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)  
**Doyle for Congress Committee**

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

Mailing Address 307 S. Dithridge St. # 812

City Pittsburgh	State PA	Zip Code 15213
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FEC ID number of contributing federal political committee. **C**

Name of Employer Nomak Custom Homes	Occupation President
--	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10501**

Amount of Each Receipt this Period  
 Receipt 300.00

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

Mailing Address Klett, Rooney, Leibert & Shorling  
40th Floor, One Oxford Center

City Pittsburgh	State PA	Zip Code 15219
--------------------	-------------	-------------------

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

Name of Employer Klett, Rooney, Leiber & Schorl	Occupation Attorney
--	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : 40107.C10564**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address 1325 Squirrel Hill Avenue

City Pittsburgh	State PA	Zip Code 15217-1149
--------------------	-------------	------------------------

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

Name of Employer Union Real Estate	Occupation Developer
---------------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : 40107.C10555**

Amount of Each Receipt this Period  
 Receipt 500.00

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

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

1300.00

**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 13 OF 86
	<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)  
**Doyle for Congress Committee**

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

Mailing Address 110 Breckenridge Drive

City State Zip Code  
Wexford PA 15090-9400

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

Name of Employer Occupation  
Howard Hanna Real Estate CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10497**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address 227 Chris Drive

City State Zip Code  
Irwin PA 15642-9144

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

Name of Employer Occupation  
Howard Hanna Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10490**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address 301 Smithfield Street

City State Zip Code  
Pittsburgh PA 15222-2207

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

Name of Employer Occupation  
Maurice A. Nernberg & Asso. Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10504**

Amount of Each Receipt this Period  
 Receipt 500.00

**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 14 OF 86  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Doyle for Congress Committee**

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

Mailing Address 131 Fieldclub Road

City Pittsburgh State PA Zip Code 15238

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

Name of Employer Graziano Construction Occupation President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10495**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address 1321 Bennington Avenue

City Pittsburgh State PA Zip Code 15217

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

Name of Employer Perlow Investments Occupation real estate

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : 40107.C10562**

Amount of Each Receipt this Period  
 Receipt 500.00

**C.** Full Name (Last, First, Middle Initial)  
**William A. Pietragallo, II**

Mailing Address One Oxford Centre, 38th FL

City Pittsburgh State PA Zip Code 15219-1400

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

Name of Employer Pietragallo,Gordon,Alfano,Bosi Occupation Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10505**

Amount of Each Receipt this Period  
 Receipt 500.00

**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 15 OF 86  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Doyle for Congress Committee**

**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 President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : 40107.C10557**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address 5411 Hobart Street

City Pittsburgh State PA Zip Code 15217

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : 40107.C10559**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address 208 Fairview Rd.

City Pittsburgh State PA Zip Code 15238-1904

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

Name of Employer Self Occupation Physician

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : 40107.C10563**

Amount of Each Receipt this Period  
 Receipt 500.00

**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 16 OF 86
	<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)  
**Doyle for Congress Committee**

**A. Rig Riggins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15 Winding Rd.  
 City Leetsdale State PA Zip Code 15056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer YMCA Of Greater Pittsburgh Occupation Non P:rofit Management  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013  
**Transaction ID : 31116.C10500**  
 Amount of Each Receipt this Period  
 Receipt 300.00

**B. William Rudolph**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 310 Grant St. Ste. 2500  
 City Pittsburgh State PA Zip Code 15219-2303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer McKnight Development Corp. Occupation President  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 20 / 2013  
**Transaction ID : 40107.C10561**  
 Amount of Each Receipt this Period  
 Receipt 500.00

**C. A. William Schenck III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 Little Lane  
 City Pittsburgh State PA Zip Code 15215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tristate Capital Bank Occupation President  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013  
**Transaction ID : 31116.C10499**  
 Amount of Each Receipt this Period  
 Receipt 500.00

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

1300.00

**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 17 OF 86
	<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)  
**Doyle for Congress Committee**

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

Mailing Address 230 W. Windsor Avenue

City: Alexandria State: VA Zip Code: 22301

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

Name of Employer: Alpine Group Occupation: Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 11 / 03 / 2013

**Transaction ID : 40107.C10533**

Amount of Each Receipt this Period: 500.00

Receipt

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

Mailing Address 215 N. Woodland Rd.

City: Pittsburgh State: PA Zip Code: 15232

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

Name of Employer: Genco Distribution Occupation: Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 20 / 2013

**Transaction ID : 40107.C10567**

Amount of Each Receipt this Period: 500.00

Receipt

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

Mailing Address 1400 Bennington Avenue

City: Pittsburgh State: PA Zip Code: 15217-1139

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

Name of Employer: Franco Associates Occupation: Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 10 / 23 / 2013

**Transaction ID : 31116.C10486**

Amount of Each Receipt this Period: 300.00

Receipt

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 86
	<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)  
**Doyle for Congress Committee**

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

Mailing Address 5315 Riverfront Drive

City Pittsburgh State PA Zip Code 15238

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

Name of Employer Howard Hanna Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10496**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address 1501 Beechwood Blvd.I

City Pittsburgh State PA Zip Code 15217

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

Name of Employer Washington Real Estate Occupation real estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : 40107.C10566**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address 2975 Beechwood Blvd.

City Pittsburgh State PA Zip Code 15217

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

Name of Employer Weisslines Occupation salesman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : 40107.C10565**

Amount of Each Receipt this Period  
 Receipt 500.00

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

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

1500.00

21200.00

**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 86
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>ActBlue PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2013
Mailing Address P.O. Box 382110		<b>Transaction ID : 31116.C10482</b>
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer	Occupation	Memo
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 0.00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>ActBlue PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 03 / 2013
Mailing Address P.O. Box 382110		<b>Transaction ID : 40107.C10532</b>
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Memo
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 0.00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>ActBlue PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 07 / 2013
Mailing Address P.O. Box 382110		<b>Transaction ID : 31116.C10517</b>
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
Name of Employer	Occupation	Memo
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 0.00	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> 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 20 OF 86
	<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)  
**Doyle for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Allegheny Technologies Inc. PAC**

Mailing Address 1000 Six PPG Place

City Pittsburgh State PA Zip Code 15222-5479

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2013

**Transaction ID : 40107.C10521**

Amount of Each Receipt this Period  
 Receipt 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Amazon Corporate LLC PAC**

Mailing Address 126 C Street, NW

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : 40107.C10547**

Amount of Each Receipt this Period  
 Receipt 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Amer Fed of Teachers PAC**

Mailing Address Committe of Political Education  
555 New Jersey Ave., NW

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : 40107.C10572**

Amount of Each Receipt this Period  
 Receipt 1500.00

**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 21 OF 86
	<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)  
**Doyle for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Amer. Crystal Sugar PAC**

Mailing Address 101 North Third Street

City Moorhead State MN Zip Code 56560

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 21 / 2013

**Transaction ID : 40107.C10527**

Amount of Each Receipt this Period  
**2500.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Amer. Fed. of State, County & Municipal**

Mailing Address Employees, AFL-CIO Public Employee  
Organized to Promote Leg. Equality

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : 40107.C10553**

Amount of Each Receipt this Period  
**1000.00**

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**American Cable Association PAC**

Mailing Address One Parkway Center, Suite 212  
875 Greentree Road

City Pittsburgh State PA Zip Code 15220-3505

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : 40107.C10540**

Amount of Each Receipt this Period  
**1000.00**

Receipt

**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 22 OF 86
	<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)  
**Doyle for Congress Committee**

**A. Boilermakers LEAP PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 753 State Avenue  
 Suite 565  
 City Kansas City State KS Zip Code 66101-2511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2013  
**Transaction ID : 40107.C10526**  
 Amount of Each Receipt this Period  
 Receipt 2500.00  
 Receipt 4500.00

**B. BrainPAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address American Academy of Neurology  
 201 Chicago Avenue  
 City Minneapolis State MN Zip Code 55415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : 40107.C10542**  
 Amount of Each Receipt this Period  
 Receipt 1000.00  
 Receipt 1000.00

**C. Carpenters Legislative Improvement Com.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 Constitution Ave., NW  
 10th Floor  
 City Washington State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 26 / 2013  
**Transaction ID : 40107.C10582**  
 Amount of Each Receipt this Period  
 Receipt 5000.00  
 Receipt 10000.00

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

8500.00

**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 86
	<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)  
**Doyle for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**CBEYOND, INC. PAC**

Mailing Address 320 Interstate North Parkway SE, S

City Atlanta State GA Zip Code 30339

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2013

**Transaction ID : 40107.C10573**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address Employees for Better Govt. - Feder  
One Energy Plaza

City Jackson State MI Zip Code 49201

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2013

**Transaction ID : 40107.C10525**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address 900 17th St, NW, Suite 400

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : 40107.C10546**

Amount of Each Receipt this Period  
 Receipt 500.00

**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: (check only one)	PAGE 24 OF 86
	<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)  
**Doyle for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Cox Enterprises PAC**

Mailing Address 975 F St., NW, Suite 300

City Washington State DC Zip Code 20004-1459

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : 40107.C10539**

Amount of Each Receipt this Period  
**1000.00**

Receipt

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

Mailing Address 1400 16th Street, NW, Suite 600

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : 40107.C10543**

Amount of Each Receipt this Period  
**1000.00**

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Dickie McCamey & Chilcote PAC**

Mailing Address 2 PPG Place  
Suite 400

City Pittsburgh State PA Zip Code 15222

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 17 / 2013

**Transaction ID : 31018.C10479**

Amount of Each Receipt this Period  
**500.00**

Receipt

**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 25 OF 86  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Doyle for Congress Committee**

**A.** 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**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2013

**Transaction ID : 40107.C10529**

Amount of Each Receipt this Period  
 Receipt 2500.00

5000.00

**B.** 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**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2013

**Transaction ID : 40107.C10528**

Amount of Each Receipt this Period  
 Receipt 2500.00

7500.00

**C.** Full Name (Last, First, Middle Initial)  
**Energy Transfer Partners PAC**

Mailing Address 711 Louisiana Street Suite 900

City Houston State TX Zip Code 77002

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : 40112.C10584**

Amount of Each Receipt this Period  
 Receipt 1000.00

1000.00

**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 26 OF 86
	<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)  
**Doyle for Congress Committee**

**A. Great Lakes Sugarbeet Growers PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2600 South Euclid Avenue  
 City Bay City State MI Zip Code 48707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 27 / 2013  
**Transaction ID : 40107.C10571**  
 Amount of Each Receipt this Period  
 Receipt 2000.00

**B. GRIDIRON PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address c/o National Football League  
 345 Park Avenue  
 City New York State NY Zip Code 10154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2013  
**Transaction ID : 40107.C10574**  
 Amount of Each Receipt this Period  
 Receipt 1000.00

**C. H.J. Heinz PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 PPG Place  
 Suite 3100  
 City Pittsburgh State PA Zip Code 15222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : 40107.C10537**  
 Amount of Each Receipt this Period  
 Receipt 1000.00

**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 27 OF 86
	<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)  
**Doyle for Congress Committee**

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

Mailing Address The Huntington Bancshares, Inc.  
41 South High Street

City Columbus State OH Zip Code 43215

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 11 / 2013

**Transaction ID : 31116.C10520**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address 1800 Center Street

City Camp Hill State PA Zip Code 17089-0089

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2013

**Transaction ID : 31116.C10507**

Amount of Each Receipt this Period  
 Receipt 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Human Rights Campaign PAC**

Mailing Address 1640 Rhode Island Avenue NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : 40107.C10538**

Amount of Each Receipt this Period  
 Receipt 1000.00

**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 28 OF 86
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>INTEGRAPAC OF</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 13 / 2013	
Mailing Address Integra Telecom Holdings Inc. 1201 NE Lloyd Blvd., Suite 500		<b>Transaction ID : 40107.C10536</b>	
City Portland	State OR	Zip Code 97232	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 1000.00	
Name of Employer Occupation		Election Cycle-to-Date 2000.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>Ironworkers PAL</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2013	
Mailing Address 1750 New York Ave., NW Suite 400		<b>Transaction ID : 40107.C10575</b>	
City Washington	State DC	Zip Code 20006	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 5000.00	
Name of Employer Occupation		Election Cycle-to-Date 10000.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 10000.00	

Full Name (Last, First, Middle Initial) <b>JSTREET PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013	
Mailing Address P.O. Box 33106		<b>Transaction ID : 40107.C10551</b>	
City Washington	State DC	Zip Code 20033-3106	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Memo 10.00	
Name of Employer Occupation		Election Cycle-to-Date 0.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 0.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> 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 29 OF 86
	<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)  
**Doyle for Congress Committee**

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

Mailing Address P.O. Box 33106

City Washington State DC Zip Code 20033-3106

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 27 / 2013

**Transaction ID : 40107.C10570**

Amount of Each Receipt this Period  
 Receipt 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Kelley Drye Warren LLPShannon, PAC**

Mailing Address 3050 K Street, NW, Suite 400

City Washington State DC Zip Code 20007

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2013

**Transaction ID : 40107.C10522**

Amount of Each Receipt this Period  
 Receipt 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Laboratory Corp.of America Holdings**

Mailing Address Polical Participation Committee  
231 Maple Avenue

City Burlington State NC Zip Code 27215

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2013

**Transaction ID : 40107.C10524**

Amount of Each Receipt this Period  
 Receipt 1000.00

**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 30 OF 86
	<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)  
**Doyle for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Level 3 Communications Inc. PAC**

Mailing Address 1025 Eldorado Blvd.

City Broomfield State CO Zip Code 80021

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : 40107.C10535**

Amount of Each Receipt this Period  
 Receipt 2000.00

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

Mailing Address 905 16th Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 27 / 2013

**Transaction ID : 40107.C10568**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address 444 N. Capitol St., NW  
Suite 800

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 21 / 2013

**Transaction ID : 40107.C10530**

Amount of Each Receipt this Period  
 Receipt 1000.00

**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 31 OF 86
	<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)  
**Doyle for Congress Committee**

**A. National Multi Housing Council PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1850 M St., NW Suite 540  
 City Washington State DC Zip Code 20036-5816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2013  
**Transaction ID : 40107.C10550**  
 Amount of Each Receipt this Period  
**2500.00**  
 Receipt

**B. Natl. Restaurant Association PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2055 L Street NW  
 City Washington State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 27 / 2013  
**Transaction ID : 40107.C10569**  
 Amount of Each Receipt this Period  
**2500.00**  
 Earmarked(Receipt)

**C. NextEra Energy Pac**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 Universe Blvd.  
 City Juno Beach State FL Zip Code 33408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2013  
**Transaction ID : 31116.C10511**  
 Amount of Each Receipt this Period  
**1000.00**  
 Receipt

**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 32 OF 86
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Novo Nordisk Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 18 / 2013	
Mailing Address 1155 F St., NW Suite 1150		<b>Transaction ID : 40107.C10578</b>	
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period Receipt 1000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation		
Receipt For: 2014 <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>B. Nucor Corporation PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 13 / 2013	
Mailing Address 1915 Rexford Road		<b>Transaction ID : 40107.C10545</b>	
City Charlotte State NC Zip Code 28211	Amount of Each Receipt this Period Receipt 1000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation		
Receipt For: 2014 <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>C. RBS Citizens PAC</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 07 / 2013	
Mailing Address 1 Citizens Plaza		<b>Transaction ID : 31116.C10518</b>	
City Providence State RI Zip Code 02903	Amount of Each Receipt this Period Receipt 500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 33 OF 86
	<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)  
**Doyle for Congress Committee**

**A. Realtors PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 N. Michigan Ave.  
 City Chicago State IL Zip Code 60611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : 40107.C10541**  
 Amount of Each Receipt this Period  
 Receipt 1000.00  
 Election Cycle-to-Date  
 2000.00

**B. Southern Company PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 241 Ralph McGill Boulevard, NE  
 City Atlanta State GA Zip Code 30308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 10 / 2013  
**Transaction ID : 31116.C10519**  
 Amount of Each Receipt this Period  
 Receipt 1000.00  
 Election Cycle-to-Date  
 1000.00

**C. Sprint Nextel PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12502 Sunrise Valley Drive  
 City Reston State VA Zip Code 20196  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 05 / 2013  
**Transaction ID : 40107.C10576**  
 Amount of Each Receipt this Period  
 Receipt 1000.00  
 Election Cycle-to-Date  
 3000.00

**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 34 OF 86
	<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	

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)  
**Doyle for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Trinity Industries Employee PAC SF, Inc.**

Mailing Address 2525 Stemmons Fwy.

City Dallas State TX Zip Code 75207

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 27 / 2013

**Transaction ID : 31116.C10509**

Amount of Each Receipt this Period  
 Receipt 1500.00

Election Cycle-to-Date  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**TW Telecom Inc. PAC**

Mailing Address 10475 Park Meadows Drive

City Littleton State CO Zip Code 80124

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : 40107.C10577**

Amount of Each Receipt this Period  
 Receipt 2000.00

Election Cycle-to-Date  
 3000.00

**C.** Full Name (Last, First, Middle Initial)  
**U.S. Steel PAC**

Mailing Address 600 Grant Street

City Pittsburgh State PA Zip Code 15219-2800

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2013

**Transaction ID : 40107.C10523**

Amount of Each Receipt this Period  
 Receipt 1000.00

Election Cycle-to-Date  
 2000.00

**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: PAGE 35 OF 86  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Doyle for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**United Mine Workers of America -**

Mailing Address 18354 Quantico Gateway Drive

City State Zip Code  
Triangle VA 22172

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : 40107.C10544**

Amount of Each Receipt this Period  
Receipt 1000.00

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

Mailing Address 4001 Rodney Parham Rd.

City State Zip Code  
Little Rock AR 72212

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : 40107.C10548**

Amount of Each Receipt this Period  
Receipt 500.00

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

Mailing Address 13865 Sunrise Valley Drive, 4th Fl

City State Zip Code  
Herndon VA 20171

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 20 / 2013

**Transaction ID : 40107.C10549**

Amount of Each Receipt this Period  
Receipt 2000.00

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

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

3500.00

66000.00

**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 36 OF 86
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doyle for Congress Committee**

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

Mailing Address 205 Hawthorne Ct.

City Pittsburgh State PA Zip Code 15221-

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

Name of Employer U.S. House of Representatives Occupation Congressman

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1344.18**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2013**

**Transaction ID : 31116.C10510**

Amount of Each Receipt this Period  
**89.18**

Offsets to Operating Expenditu

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

Mailing Address 205 Hawthorne Ct.

City Pittsburgh State PA Zip Code 15221-

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

Name of Employer U.S. House of Representatives Occupation Congressman

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1422.18**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 02 / 2013**

**Transaction ID : 40107.C10534**

Amount of Each Receipt this Period  
**78.00**

Offsets to Operating Expenditu

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

Mailing Address 205 Hawthorne Ct.

City Pittsburgh State PA Zip Code 15221-

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

Name of Employer U.S. House of Representatives Occupation Congressman

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1556.78**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 31 / 2013**

**Transaction ID : 40107.C10579**

Amount of Each Receipt this Period  
**134.60**

Offsets to Operating Expenditu

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>301.78</b>
<b>TOTAL</b> 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 37 OF 86
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doyle for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Borough of Forest Hills**

Mailing Address 2071 Ardmore Blvd.

City Pittsburgh State PA Zip Code 15221-

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2013

**Transaction ID : 31018.C10478**

Amount of Each Receipt this Period  
 250.00

Offsets to Operating Expenditu

**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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

250.00

551.78

**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 86
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>Dollar Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2013	
Mailing Address 22 Braddock Hills Office 274 Yost Blvd.		<b>Transaction ID : 40107.C10581</b>	
City Pittsburgh	State PA	Zip Code 15221-	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.64	
Name of Employer Occupation		Interest Received	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 205.04	

Full Name (Last, First, Middle Initial) <b>Dollar Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2013	
Mailing Address 22 Braddock Hills Office 274 Yost Blvd.		<b>Transaction ID : 40107.C10580</b>	
City Pittsburgh	State PA	Zip Code 15221-	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 78.05	
Name of Employer Occupation		Interest Received	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 283.09	

Full Name (Last, First, Middle Initial) <b>Dollar Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013	
Mailing Address 22 Braddock Hills Office 274 Yost Blvd.		<b>Transaction ID : 40107.C10583</b>	
City Pittsburgh	State PA	Zip Code 15221-	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 74.37	
Name of Employer Occupation		Interest Received	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 357.46	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	233.06
<b>TOTAL</b> This Period (last page this line number only).....	233.06

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. A-1 Rental Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 300 East 6th St.		Amount of Each Disbursement this Period 548.91
City Tarentum	State PA	
Zip Code 15084-	Purpose of Disbursement DFC picnic rental	DFC PICNIC RENTAL
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:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 1.39
City Cambridge	State MA	
Zip Code 02138-	Purpose of Disbursement Service fee	SERVICE FEE
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:		

Full Name (Last, First, Middle Initial) <b>c. ActBlue Technical Service</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 19.75
City Cambridge	State MA	
Zip Code 02138-	Purpose of Disbursement Service Fee	SERVICE FEE
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	570.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 86	
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Service</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address 14 Arrow Street			Amount of Each Disbursement this Period 0.04
City Cambridge	State MA	Zip Code 02138-	
Purpose of Disbursement Service fee		Candidate Name	Transaction ID : 31116.E11260
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:	SERVICE FEE

Full Name (Last, First, Middle Initial) <b>B. American Express</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address P.O. Box 1270			Amount of Each Disbursement this Period 2937.66
City Newark	State NJ	Zip Code 07101-1270	
Purpose of Disbursement Credit Card: See Below		Candidate Name	Transaction ID : 31007.E11147
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:	CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial) <b>c. US Airways</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2013
Mailing Address 2345 Crystal Dr.			Amount of Each Disbursement this Period 300.89
City Arlington	State VA	Zip Code 22227-	
Purpose of Disbursement Travel expense		Candidate Name	Transaction ID : 31007.E11150
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:	[MEMO ITEM] MEMO: TRAVEL EXPENSE

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2937.70
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 86	
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Andora</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2013
Mailing Address 599 Dorseyville Rd.		Amount of Each Disbursement this Period 107.00
City Pittsburgh	State PA	
Zip Code 15238-	Purpose of Disbursement Committee meeting	Transaction ID : 31007.E11151
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)	[MEMO ITEM] MEMO: COMMITTEE MEETING
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Stamps.com Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2013
Mailing Address 12959 Coral Tree Place		Amount of Each Disbursement this Period 15.99
City Los Angeles	State CA	
Zip Code 90066-	Purpose of Disbursement Postage	Transaction ID : 31007.E11152
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)	[MEMO ITEM] MEMO: POSTAGE
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Improv</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2013
Mailing Address 166 E. Bridge St.		Amount of Each Disbursement this Period 207.93
City Homestead	State PA	
Zip Code 15120-	Purpose of Disbursement Charity fundraiser	Transaction ID : 31007.E11154
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)	[MEMO ITEM] MEMO: CHARITY FUNDRAISER
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Riverlife</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2013
Mailing Address Gulf Tower 707 Grant St., Suite 3500		Amount of Each Disbursement this Period 600.00
City Pittsburgh	State PA Zip Code 15219-	
Purpose of Disbursement Tickets	Candidate Name	Transaction ID : 31007.E11155
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: TICKETS

Full Name (Last, First, Middle Initial) <b>B. New York Times</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2013
Mailing Address 620 8th Avenue		Amount of Each Disbursement this Period 45.20
City New York	State NY Zip Code 10018-	
Purpose of Disbursement Subscription	Candidate Name	Transaction ID : 31007.E11156
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: SUBSCRIPTION

Full Name (Last, First, Middle Initial) <b>c. Lidias</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2013
Mailing Address 1400 Smallman Street		Amount of Each Disbursement this Period 905.93
City Pittsburgh	State PA Zip Code 15222-	
Purpose of Disbursement Appreciation dinner	Candidate Name	Transaction ID : 31007.E11158
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: APPRECIATION DINNER

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. The Carlton</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2013
Mailing Address Mellon Bank Center		Amount of Each Disbursement this Period 170.79
City Pittsburgh	State PA Zip Code 15219-	
Purpose of Disbursement Committee meeting	Candidate Name	Transaction ID : 31007.E11161
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: COMMITTEE MEETING

Full Name (Last, First, Middle Initial) <b>B. Get-Go</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2013
Mailing Address 430 E. Waterfront Dr.		Amount of Each Disbursement this Period 100.00
City Homestead	State PA Zip Code 15120-	
Purpose of Disbursement Gift cards	Candidate Name	Transaction ID : 31007.E11162
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: GIFT CARDS

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2013
Mailing Address 1736 S. Braddock Ave.		Amount of Each Disbursement this Period 16.57
City Pittsburgh	State PA Zip Code 15218-	
Purpose of Disbursement Office supplies	Candidate Name	Transaction ID : 31007.E11164
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: OFFICE SUPPLIES

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial)  
**A. Get-Go**

Mailing Address 430 E. Waterfront Dr.

City Homestead State PA Zip Code 15120-

Purpose of Disbursement Campaign car-monthly gas

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 30 / 2013

Amount of Each Disbursement this Period: 31.78

Transaction ID : 31007.E11165

**[MEMO ITEM]**  
MEMO: CAMPAIGN CAR-MONTHLY GAS

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

Mailing Address 3954 William Penn Highway

City Monroeville State PA Zip Code 15146-

Purpose of Disbursement Campaign car-monthly gas

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 30 / 2013

Amount of Each Disbursement this Period: 38.50

Transaction ID : 31007.E11166

**[MEMO ITEM]**  
MEMO: CAMPAIGN CAR-MONTHLY GAS

Full Name (Last, First, Middle Initial)  
**C. Sunoco-Penn Hills**

Mailing Address 600 Rodi Rd.

City Pittsburgh State PA Zip Code 15235-

Purpose of Disbursement Campaign car-monthly gas

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 30 / 2013

Amount of Each Disbursement this Period: 37.00

Transaction ID : 31007.E11167

**[MEMO ITEM]**  
MEMO: CAMPAIGN CAR-MONTHLY GAS

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**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 45 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Exxonmobil</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2013
Mailing Address 2305 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 77.15
City Washington	State DC	
Zip Code 20020-		Transaction ID : 31007.E11168
Purpose of Disbursement Campaign car-monthly gas	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: CAMPAIGN CAR-MONTHLY GAS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address P.O. Box 1270		Amount of Each Disbursement this Period 3995.12
City Newark	State NJ	
Zip Code 07101-1270		Transaction ID : 31116.E11224
Purpose of Disbursement Credit Card: See Below	Category/Type	
Candidate Name		CREDIT CARD: SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Stamps.com Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2013
Mailing Address 12959 Coral Tree Place		Amount of Each Disbursement this Period 15.99
City Los Angeles	State CA	
Zip Code 90066-		Transaction ID : 31116.E11232
Purpose of Disbursement Postage	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3995.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Marriott-Hartford Ct.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2013
Mailing Address 200 Columbus Rd.		Amount of Each Disbursement this Period 350.20
City Hartford	State CT Zip Code 06103-	
Purpose of Disbursement Lodging-Fundraiser	Candidate Name	Transaction ID : 31116.E11233
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	<b>[MEMO ITEM]</b> MEMO: LODGING-FUNDRAISER

Full Name (Last, First, Middle Initial) <b>B. New York Times</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2013
Mailing Address 620 8th Avenue		Amount of Each Disbursement this Period 45.20
City New York	State NY Zip Code 10018-	
Purpose of Disbursement Subscription	Candidate Name	Transaction ID : 31116.E11235
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	<b>[MEMO ITEM]</b> MEMO: SUBSCRIPTION

Full Name (Last, First, Middle Initial) <b>C. Casa Luca</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2013
Mailing Address 1109 New York Avenue NW		Amount of Each Disbursement this Period 84.00
City Washington	State DC Zip Code 20001-	
Purpose of Disbursement Delegation meeting	Candidate Name	Transaction ID : 31116.E11237
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	<b>[MEMO ITEM]</b> MEMO: DELEGATION MEETING

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Rayburn Cafeteria</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2013
Mailing Address Rayburn House Office Bldg. 45 Independence Ave. SW		Amount of Each Disbursement this Period 112.45
City Washington State DC Zip Code 20515-	Transaction ID : 31116.E11239	
Purpose of Disbursement Delegation meeting	Candidate Name	[MEMO ITEM] MEMO: DELEGATION MEETING
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Corcoran Caterers</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 2401 Montgomery St.		Amount of Each Disbursement this Period 785.62
City Silver Spring State MD Zip Code 20910-	Transaction ID : 31116.E11240	
Purpose of Disbursement Fundraiser-food/bev.	Candidate Name	[MEMO ITEM] MEMO: FUNDRAISER-FOOD/BEV.
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 30 Ivy St., SE		Amount of Each Disbursement this Period 173.00
City Washington State DC Zip Code 20003-4071	Transaction ID : 31116.E11242	
Purpose of Disbursement Delegation meeting	Candidate Name	[MEMO ITEM] MEMO: DELEGATION MEETING
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address 101 Constitution Avenue, NW  
Suite 801 East

City Washington State DC Zip Code 20001-

Purpose of Disbursement Mail Service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 03 / 2013

Amount of Each Disbursement this Period: 95.04

Transaction ID : 31116.E11243

**[MEMO ITEM]**  
MEMO: MAIL SERVICE

Full Name (Last, First, Middle Initial)

**B. Alamo**

Mailing Address Pittsburgh International Airpoe=r

City Pittsburgh State PA Zip Code 15231-

Purpose of Disbursement Rental

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2013

Amount of Each Disbursement this Period: 333.33

Transaction ID : 31116.E11244

**[MEMO ITEM]**  
MEMO: RENTAL

Full Name (Last, First, Middle Initial)

**C. Pittsburgh Post-Gazette**

Mailing Address P.O. Box 747012

City Pittsburgh State PA Zip Code 15219-

Purpose of Disbursement Subscription

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 12 / 2013

Amount of Each Disbursement this Period: 19.80

Transaction ID : 31116.E11245

**[MEMO ITEM]**  
MEMO: SUBSCRIPTION

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**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 49 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2013
Mailing Address 405 Howard St. #550		Amount of Each Disbursement this Period 109.41
City San Francisco	State CA	
Zip Code 94105-2999	Purpose of Disbursement Transportation	Transaction ID : 31116.E11246
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)	[MEMO ITEM] MEMO: TRANSPORTATION
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sheetz</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 3954 William Penn Highway		Amount of Each Disbursement this Period 78.67
City Monroeville	State PA	
Zip Code 15146-	Purpose of Disbursement Campaign car-monthly gas	Transaction ID : 31116.E11247
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)	[MEMO ITEM] MEMO: CAMPAIGN CAR-MONTHLY GAS
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Exxonmobil</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 2305 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 132.73
City Washington	State DC	
Zip Code 20020-	Purpose of Disbursement Campaign car-monthly gas	Transaction ID : 31116.E11248
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)	[MEMO ITEM] MEMO: CAMPAIGN CAR-MONTHLY GAS
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Get-Go</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 430 E. Waterfront Dr.		Amount of Each Disbursement this Period 22.62
City Homestead	State PA	
Zip Code 15120-	Purpose of Disbursement Campaign car-monthly gas	Transaction ID : 31116.E11250
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)	[MEMO ITEM] MEMO: CAMPAIGN CAR-MONTHLY GAS
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sunoco-Penn Hills</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 600 Rodi Rd.		Amount of Each Disbursement this Period 28.52
City Pittsburgh	State PA	
Zip Code 15235-	Purpose of Disbursement Campaign car-monthly gas	Transaction ID : 31116.E11251
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)	[MEMO ITEM] MEMO: CAMPAIGN CAR-MONTHLY GAS
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PLCB Shoppe 9209</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 308 Mall Blvd.		Amount of Each Disbursement this Period 1234.41
City Monroeville	State PA	
Zip Code 15146-	Purpose of Disbursement Bev.-DFC picnic	Transaction ID : 31116.E11252
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)	[MEMO ITEM] MEMO: BEV.-DFC PICNIC
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2013
Mailing Address P.O. Box 1270		Amount of Each Disbursement this Period 2858.85
City Newark State NJ Zip Code 07101-1270	Purpose of Disbursement Credit Card: See Below	Transaction ID : 40107.E11275
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)	CREDIT CARD: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) <b>B. New York Times</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2013
Mailing Address 620 8th Avenue		Amount of Each Disbursement this Period 45.20
City New York State NY Zip Code 10018-	Purpose of Disbursement Subscription	Transaction ID : 40107.E11281
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)	[MEMO ITEM] MEMO: SUBSCRIPTION
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Stamps.com Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address 12959 Coral Tree Place		Amount of Each Disbursement this Period 15.99
City Los Angeles State CA Zip Code 90066-	Purpose of Disbursement Postage	Transaction ID : 40107.E11282
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)	[MEMO ITEM] MEMO: POSTAGE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2858.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 86	
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. St. Francis University</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 117 Evergreen Drive PO Box 600		Amount of Each Disbursement this Period 625.00
City Loretto	State PA Zip Code 15940-	
Purpose of Disbursement Charity event	Candidate Name	Transaction ID : 40107.E11285
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: CHARITY EVENT

Full Name (Last, First, Middle Initial) <b>B. Federal City Caterer</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 1119 12th St., NW		Amount of Each Disbursement this Period 1387.75
City Washington	State DC Zip Code 20005-	
Purpose of Disbursement Fundraiser-food/bev.	Candidate Name	Transaction ID : 40107.E11286
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: FUNDRAISER-FOOD/BEV.

Full Name (Last, First, Middle Initial) <b>C. Pittsburgh Post-Gazette</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address P.O. Box 747012		Amount of Each Disbursement this Period 19.80
City Pittsburgh	State PA Zip Code 15219-	
Purpose of Disbursement Subscription	Candidate Name	Transaction ID : 40107.E11288
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: SUBSCRIPTION

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Hepatica</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address 1119 South Braddock Avenue		Amount of Each Disbursement this Period 276.06
City Pittsburgh	State PA Zip Code 15218-	
Purpose of Disbursement Funeral baskets	Candidate Name	Transaction ID : 40107.E11289
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: FUNERAL BASKETS

Full Name (Last, First, Middle Initial) <b>B. Pittsburgh Post-Gazette</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address P.O. Box 747012		Amount of Each Disbursement this Period 19.80
City Pittsburgh	State PA Zip Code 15219-	
Purpose of Disbursement Subscription	Candidate Name	Transaction ID : 40107.E11290
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: SUBSCRIPTION

Full Name (Last, First, Middle Initial) <b>c. Sheetz</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013
Mailing Address 3954 William Penn Highway		Amount of Each Disbursement this Period 30.53
City Monroeville	State PA Zip Code 15146-	
Purpose of Disbursement Campaign car-monthly gas	Candidate Name	Transaction ID : 40107.E11291
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: CAMPAIGN CAR-MONTHLY GAS

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013
Mailing Address 405 Howard St. #550		Amount of Each Disbursement this Period 45.00
City San Francisco	State CA	Zip Code 94105-2999
Purpose of Disbursement Transportation	Category/Type	
Candidate Name	Transaction ID : 40107.E11292	
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:	[MEMO ITEM] MEMO: TRANSPORTATION	

Full Name (Last, First, Middle Initial) <b>B. Get-Go</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013
Mailing Address 430 E. Waterfront Dr.		Amount of Each Disbursement this Period 86.18
City Homestead	State PA	Zip Code 15120-
Purpose of Disbursement Campaign car-monthly gas	Category/Type	
Candidate Name	Transaction ID : 40107.E11293	
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:	[MEMO ITEM] MEMO: CAMPAIGN CAR-MONTHLY GAS	

Full Name (Last, First, Middle Initial) <b>C. Exxonmobil</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013
Mailing Address 2305 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 36.55
City Washington	State DC	Zip Code 20020-
Purpose of Disbursement Campaign car-monthly gas	Category/Type	
Candidate Name	Transaction ID : 40107.E11294	
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:	[MEMO ITEM] MEMO: CAMPAIGN CAR-MONTHLY GAS	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address P.O. Box 1270		Amount of Each Disbursement this Period 2192.93
City Newark State NJ Zip Code 07101-1270	Purpose of Disbursement Credit Card: See below	Transaction ID : 40107.E11312
Candidate Name	Category/Type	CREDIT CARD: SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2013
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 425.89
City Atlanta State GA Zip Code 30320-6001	Purpose of Disbursement Travel expense-PA Soc. Conf.	Transaction ID : 40107.E11317
Candidate Name	Category/Type	[MEMO ITEM]
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)	MEMO: TRAVEL EXPENSE-PA SOC. CONF.
State: District:		

Full Name (Last, First, Middle Initial) <b>C. New York Times</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2013
Mailing Address 620 8th Avenue		Amount of Each Disbursement this Period 45.20
City New York State NY Zip Code 10018-	Purpose of Disbursement Subscription	Transaction ID : 40107.E11319
Candidate Name	Category/Type	[MEMO ITEM]
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)	MEMO: SUBSCRIPTION
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2192.93
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 86			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 30 Ivy St., SE		Amount of Each Disbursement this Period 78.13
City Washington	State DC	
Zip Code 20003-4071	Purpose of Disbursement Delegation meeting	Transaction ID : 40107.E11320
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)	[MEMO ITEM] MEMO: DELEGATION MEETING
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Stamps.com Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 12959 Coral Tree Place		Amount of Each Disbursement this Period 15.99
City Los Angeles	State CA	
Zip Code 90066-	Purpose of Disbursement Postage	Transaction ID : 40107.E11321
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)	[MEMO ITEM] MEMO: POSTAGE
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Rayburn Cafeteria</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address Rayburn House Office Bldg. 45 Independence Ave. SW		Amount of Each Disbursement this Period 102.26
City Washington	State DC	
Zip Code 20515-	Purpose of Disbursement Delegation meeting	Transaction ID : 40107.E11323
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)	[MEMO ITEM] MEMO: DELEGATION MEETING
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 86			
	<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)  
**Doyle for Congress Committee**

**A. Carmines**

Full Name (Last, First, Middle Initial)  
Mailing Address 425 7th St. NW

City Washington State DC Zip Code 20004-

Purpose of Disbursement Delegation meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 20 / 2013

Amount of Each Disbursement this Period: 274.00

Transaction ID : 40107.E11326

**[MEMO ITEM]**  
MEMO: DELEGATION MEETING

**B. Alexandria Pastry Shop**

Full Name (Last, First, Middle Initial)  
Mailing Address 3690 H King St.

City Alexandria State VA Zip Code 22302-

Purpose of Disbursement Fundraiser-catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 04 / 2013

Amount of Each Disbursement this Period: 256.84

Transaction ID : 40107.E11329

**[MEMO ITEM]**  
MEMO: FUNDRAISER-CATERING

**c. Office Depot**

Full Name (Last, First, Middle Initial)  
Mailing Address 1736 S. Braddock Ave.

City Pittsburgh State PA Zip Code 15218-

Purpose of Disbursement Office supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 07 / 2013

Amount of Each Disbursement this Period: 105.92

Transaction ID : 40107.E11330

**[MEMO ITEM]**  
MEMO: OFFICE SUPPLIES

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

**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 58 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. New York Times</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2013
Mailing Address 620 8th Avenue		Amount of Each Disbursement this Period 45.20
City New York	State NY	
Zip Code 10018-	Purpose of Disbursement Subscription	Transaction ID : 40107.E11331
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)	[MEMO ITEM] MEMO: SUBSCRIPTION
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Pittsburgh Post-Gazette</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address P.O. Box 747012		Amount of Each Disbursement this Period 19.80
City Pittsburgh	State PA	
Zip Code 15219-	Purpose of Disbursement Subscription	Transaction ID : 40107.E11332
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)	[MEMO ITEM] MEMO: SUBSCRIPTION
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Get-Go</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 430 E. Waterfront Dr.		Amount of Each Disbursement this Period 40.16
City Homestead	State PA	
Zip Code 15120-	Purpose of Disbursement Campaign car-monthly gas	Transaction ID : 40107.E11333
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)	[MEMO ITEM] MEMO: CAMPAIGN CAR-MONTHLY GAS
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Sheetz</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 3954 William Penn Highway		Amount of Each Disbursement this Period 61.40
City Monroeville	State PA	
Zip Code 15146-	Purpose of Disbursement Campaign car-monthly gas	Transaction ID : 40107.E11334
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)	[MEMO ITEM] MEMO: CAMPAIGN CAR-MONTHLY GAS
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sunoco-Penn Hills</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 600 Rodi Rd.		Amount of Each Disbursement this Period 26.20
City Pittsburgh	State PA	
Zip Code 15235-	Purpose of Disbursement Campaign car-monthly gas	Transaction ID : 40107.E11335
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)	[MEMO ITEM] MEMO: CAMPAIGN CAR-MONTHLY GAS
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 405 Howard St. #550		Amount of Each Disbursement this Period 54.00
City San Francisco	State CA	
Zip Code 94105-2999	Purpose of Disbursement Transportation	Transaction ID : 40107.E11336
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)	[MEMO ITEM] MEMO: TRANSPORTATION
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. PA American Legion</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address c/o Ron Conley 709 Hope Street		Amount of Each Disbursement this Period 120.00 <b>Transaction ID : 40107.E11315</b>
City Pittsburgh	State PA Zip Code 15220-	
Purpose of Disbursement Ad & Tickets	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	AD & TICKETS	

Full Name (Last, First, Middle Initial) <b>B. AT &amp; T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 169.75 <b>Transaction ID : 31018.E11217</b>
City Carol Stream	State IL Zip Code 60197-6463	
Purpose of Disbursement Phone charges	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	PHONE CHARGES	

Full Name (Last, First, Middle Initial) <b>c. AT &amp; T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 169.75 <b>Transaction ID : 40107.E11280</b>
City Carol Stream	State IL Zip Code 60197-6463	
Purpose of Disbursement Phone charges	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	PHONE CHARGES	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	459.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. AT &amp; T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 175.38
City Carol Stream	State IL	Zip Code 60197-6463
Purpose of Disbursement Phone Charge	Transaction ID : 40107.E11314	
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)	PHONE CHARGE
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Anthony Celeste</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address dba/ Anthony Jrs Pizzeria 1121 3rd Avenue		Amount of Each Disbursement this Period 2900.00
City Coraopolis	State PA	Zip Code 15108-
Purpose of Disbursement Catering DFC Picnic	Transaction ID : 31116.E11256	
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)	CATERING DFC PICNIC
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Penn Hills Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 12013 Frankstown Rd.		Amount of Each Disbursement this Period 75.00
City Pittsburgh	State PA	Zip Code 15235-
Purpose of Disbursement Dues	Transaction ID : 40107.E11310	
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)	DUES
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3150.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 86			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Keystone Collections Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 546 Wendel Rd.		Amount of Each Disbursement this Period 99.00
City Irwin	State PA	Zip Code 15642-4582
Purpose of Disbursement 3rd Quarter Wage EIT 25-1727588 (Fo	Category/ Type	<b>Transaction ID : 31007.E11172</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	3RD QUARTER WAGE EIT 25-1727588 (FO	

Full Name (Last, First, Middle Initial) <b>B. D.A.V. Chapter 76</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address c/o Al Burlikowski 1411 Harris Avenue		Amount of Each Disbursement this Period 180.00
City Pittsburgh	State PA	Zip Code 15205-
Purpose of Disbursement Ad & Tickets	Category/ Type	<b>Transaction ID : 40107.E11302</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	AD & TICKETS	

Full Name (Last, First, Middle Initial) <b>C. 14th Ward Independent Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address c/o Noel Walkington 6834 Linden Lane		Amount of Each Disbursement this Period 250.00
City Pittsburgh	State PA	Zip Code 15208-2843
Purpose of Disbursement Sponsor	Category/ Type	<b>Transaction ID : 40107.E11300</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	SPONSOR	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	529.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 86			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 30 Ivy St., SE		Amount of Each Disbursement this Period 249.00
City Washington State DC Zip Code 20003-4071	Purpose of Disbursement Delegation meeting	Transaction ID : 31018.E11200
Candidate Name	Category/Type	DELEGATION MEETING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 30 Ivy St., SE		Amount of Each Disbursement this Period 367.00
City Washington State DC Zip Code 20003-4071	Purpose of Disbursement Delegation meeting	Transaction ID : 40107.E11269
Candidate Name	Category/Type	DELEGATION MEETING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 30 Ivy St., SE		Amount of Each Disbursement this Period 148.87
City Washington State DC Zip Code 20003-4071	Purpose of Disbursement Delegation meeting	Transaction ID : 40107.E11306
Candidate Name	Category/Type	DELEGATION MEETING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	764.87
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 86	
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Allegheny County Democratic Committee</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 14 / 2013</b>
Mailing Address 223 Fourth Avenue, Suite 150			Amount of Each Disbursement this Period <b>1300.00</b>
City Pittsburgh	State PA	Zip Code 15222-	
Purpose of Disbursement Ad & tickets		Category/ Type	<b>Transaction ID : 31018.E11208</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>AD &amp; TICKETS</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Vecenies Distributing Company</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 05 / 2013</b>
Mailing Address 140 North Avenue			Amount of Each Disbursement this Period <b>569.82</b>
City Pittsburgh	State PA	Zip Code 15209-	
Purpose of Disbursement Beverage Truck - DFC Picnic		Category/ Type	<b>Transaction ID : 31007.E11187</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>BEVERAGE TRUCK - DFC PICNIC</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>c. David Doyle</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 06 / 2013</b>
Mailing Address 126 Brighton Street			Amount of Each Disbursement this Period <b>600.00</b>
City East Pittsburgh	State PA	Zip Code 15112-	
Purpose of Disbursement Professional Services-DFC picnic		Category/ Type	<b>Transaction ID : 31007.E11178</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>PROFESSIONAL SERVICES-DFC PICNIC</b>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2469.82</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 86	
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Michael Doyle</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 08 / 2013</b>	
Mailing Address 205 Hawthorne Ct.			Amount of Each Disbursement this Period <b>500.00</b>	
City Pittsburgh	State PA	Zip Code 15221-	Transaction ID : <b>31018.E11197</b>	
Purpose of Disbursement Reimbursement for DFC picnic expens		Category/ Type	REIMBURSEMENT FOR DFC PICNIC EXPENS	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Michael Doyle</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 21 / 2013</b>	
Mailing Address 205 Hawthorne Ct.			Amount of Each Disbursement this Period <b>220.00</b>	
City Pittsburgh	State PA	Zip Code 15221-	Transaction ID : <b>31116.E11223</b>	
Purpose of Disbursement Reimbursement: See Below		Category/ Type	REIMBURSEMENT: SEE BELOW	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Pittsburgh Associates</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 21 / 2013</b>	
Mailing Address 100 Art Rooney Drive			Amount of Each Disbursement this Period <b>220.00</b>	
City Pittsburgh	State PA	Zip Code 15212-	Transaction ID : <b>31116.E11264</b>	
Purpose of Disbursement Tickets purchased for Door Prize		Category/ Type	[MEMO ITEM] MEMO: TICKETS PURCHASED FOR DOOR PRIZE	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>720.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Michael Doyle</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013		
Mailing Address 205 Hawthorne Ct.			Amount of Each Disbursement this Period 146.50		
City Pittsburgh	State PA	Zip Code 15221-	Transaction ID : 31116.E11259		
Purpose of Disbursement Reimbursement - taxi & parking		Category/ Type	REIMBURSEMENT - TAXI & PARKING		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Susan B. Doyle</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013		
Mailing Address 205 Hawthorne Court			Amount of Each Disbursement this Period 2283.93		
City Pittsburgh	State PA	Zip Code 15221-	Transaction ID : 31116.E11253		
Purpose of Disbursement Salary		Category/ Type	SALARY		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Susan B. Doyle</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013		
Mailing Address 205 Hawthorne Court			Amount of Each Disbursement this Period 2283.93		
City Pittsburgh	State PA	Zip Code 15221-	Transaction ID : 40107.E11274		
Purpose of Disbursement Salary		Category/ Type	SALARY		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4714.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Susan B. Doyle</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 205 Hawthorne Court		Amount of Each Disbursement this Period 2283.93
City Pittsburgh	State PA	Zip Code 15221-
Purpose of Disbursement Salary	Category/Type	
Candidate Name	Transaction ID : 40107.E11338	
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)	SALARY
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EFTPS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address P.O. Box 173788		Amount of Each Disbursement this Period 1131.90
City Denver	State CO	Zip Code 80217-3788
Purpose of Disbursement Federal tax deposit	Category/Type	
Candidate Name	Transaction ID : 31007.E11170	
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)	FEDERAL TAX DEPOSIT
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EFTPS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address P.O. Box 173788		Amount of Each Disbursement this Period 1131.90
City Denver	State CO	Zip Code 80217-3788
Purpose of Disbursement Federal tax deposit	Category/Type	
Candidate Name	Transaction ID : 31116.E11255	
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)	FEDERAL TAX DEPOSIT
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4547.73
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 86			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. EFTPS</b>		M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address P.O. Box 173788		Amount of Each Disbursement this Period
City State Zip Code Denver CO 80217-3788		1131.90
Purpose of Disbursement Federal tax deposit		Transaction ID : 40107.E11278
Candidate Name		FEDERAL TAX DEPOSIT
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Community Empowerment Assoc.</b>		M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 7120 Kelly Street		Amount of Each Disbursement this Period
City State Zip Code Pittsburgh PA 15208-		500.00
Purpose of Disbursement Sponsor		Transaction ID : 40107.E11270
Candidate Name		SPONSOR
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>c. Hepatica</b>		M M / D D / Y Y Y Y 12 / 01 / 2013
Mailing Address 1119 South Braddock Avenue		Amount of Each Disbursement this Period
City State Zip Code Pittsburgh PA 15218-		268.57
Purpose of Disbursement Funeral Baskets		Transaction ID : 40107.E11277
Candidate Name		FUNERAL BASKETS
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1900.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 86	
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. State Workers Insurance Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address Commonwealth of Pennsylvania 100 Lackawanna Avenue		Amount of Each Disbursement this Period 249.00
City Scranton	State PA	
Zip Code 18505-5100	Purpose of Disbursement Workers compensation renewal	<b>Transaction ID : 31007.E11173</b>
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)	<b>WORKERS COMPENSATION RENEWAL</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jewish Chronicle</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 5915 Beacon St., FL 3		Amount of Each Disbursement this Period 311.75
City Pittsburgh	State PA	
Zip Code 15217-2005	Purpose of Disbursement Ad	<b>Transaction ID : 31018.E11192</b>
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)	<b>AD</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Anne Kertz Kernion</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address dba/Cards by Anne P.O. Box 99		Amount of Each Disbursement this Period 1151.75
City Wexford	State PA	
Zip Code 15090-0099	Purpose of Disbursement Postage for holiday cards	<b>Transaction ID : 40107.E11297</b>
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)	<b>POSTAGE FOR HOLIDAY CARDS</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1712.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 86	
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Kieloch Consulting, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2013</b>
Mailing Address <b>228 Second St. SE</b>		Amount of Each Disbursement this Period <b>3500.00</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20003-</b>
Purpose of Disbursement <b>Campaign Consulting</b>	Category/Type <b>CAMPAIGN CONSULTING</b>	
Candidate Name	Transaction ID : <b>31007.E11149</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kieloch Consulting, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 27 / 2013</b>
Mailing Address <b>228 Second St. SE</b>		Amount of Each Disbursement this Period <b>3500.00</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20003-</b>
Purpose of Disbursement <b>Campaign Consulting</b>	Category/Type <b>CAMPAIGN CONSULTING</b>	
Candidate Name	Transaction ID : <b>31116.E11230</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Thomas Magglico</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 13 / 2013</b>
Mailing Address <b>418 Beckman Drive.</b>		Amount of Each Disbursement this Period <b>306.19</b>
City <b>Mc Keesport</b>	State <b>PA</b>	Zip Code <b>15132-</b>
Purpose of Disbursement <b>DFC Picnic Decorations</b>	Category/Type <b>DFC PICNIC DECORATIONS</b>	
Candidate Name	Transaction ID : <b>31018.E11201</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>7306.19</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 86	
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Dan Mascio</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 5022 Glenhurst Road		Amount of Each Disbursement this Period 300.00
City Pittsburgh	State PA Zip Code 15207-	
Purpose of Disbursement DFC picnic-DJ	Candidate Name	Transaction ID : 31007.E11176
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	DFC PICNIC-DJ

Full Name (Last, First, Middle Initial) <b>B. PA Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address P.O. Box 280401		Amount of Each Disbursement this Period 101.31
City Harrisburg	State PA Zip Code 17128-0401	
Purpose of Disbursement State Withholding tax	Candidate Name	Transaction ID : 31007.E11169
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	STATE WITHHOLDING TAX

Full Name (Last, First, Middle Initial) <b>C. PA Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address P.O. Box 280401		Amount of Each Disbursement this Period 101.31
City Harrisburg	State PA Zip Code 17128-0401	
Purpose of Disbursement State Withholding tax	Candidate Name	Transaction ID : 31116.E11254
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	STATE WITHHOLDING TAX

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	502.62
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. PA Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address P.O. Box 280401		Amount of Each Disbursement this Period 101.31
City Harrisburg	State PA	
Zip Code 17128-0401	Purpose of Disbursement State Withholding tax	<b>Transaction ID : 40107.E11279</b>
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 WITHHOLDING TAX
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PA UC Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address P.O. Box 68568		Amount of Each Disbursement this Period 6.93
City Harrisburg	State PA	
Zip Code 17106-8568	Purpose of Disbursement PA UC Tax	<b>Transaction ID : 31007.E11174</b>
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)	PA UC TAX
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Barn Yard Petting Zoo</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2013
Mailing Address 15 Short Cut Road		Amount of Each Disbursement this Period 1750.00
City Eighty Four	State PA	
Zip Code 15330-	Purpose of Disbursement Rental-DFC picnic	<b>Transaction ID : 31007.E11179</b>
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)	RENTAL-DFC PICNIC
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1858.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. The Print &amp; Copy Center</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 731 Allegheny River Blvd.			Amount of Each Disbursement this Period 761.84
City Verona	State PA	Zip Code 15147-	Transaction ID : 31007.E11183
Purpose of Disbursement DFC picnic reminders		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DFC PICNIC REMINDERS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Print &amp; Copy Center</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 731 Allegheny River Blvd.			Amount of Each Disbursement this Period 486.67
City Verona	State PA	Zip Code 15147-	Transaction ID : 31007.E11184
Purpose of Disbursement Postage		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Print &amp; Copy Center</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 731 Allegheny River Blvd.			Amount of Each Disbursement this Period 350.96
City Verona	State PA	Zip Code 15147-	Transaction ID : 31018.E11195
Purpose of Disbursement DFC picnic		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	DFC PICNIC
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1599.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 86			
	<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)  
**Doyle for Congress Committee**

**A. The Print & Copy Center**

Full Name (Last, First, Middle Initial)  
Mailing Address 731 Allegheny River Blvd.

City Verona State PA Zip Code 15147-

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 07 / 2013

Amount of Each Disbursement this Period: 182.87

Transaction ID : 31018.E11194

POSTAGE

**B. Mara Rago Photography**

Full Name (Last, First, Middle Initial)  
Mailing Address 5720 Friendship Avenue Studio 215

City Pittsburgh State PA Zip Code 15206-

Purpose of Disbursement Campaign Photography

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 07 / 2013

Amount of Each Disbursement this Period: 1000.00

Transaction ID : 31018.E11191

CAMPAIGN PHOTOGRAPHY

**c. St. Maurice Parish**

Full Name (Last, First, Middle Initial)  
Mailing Address Attn: Janet Estocin- Gala Organizi East Catholic School

City Pittsburgh State PA Zip Code 15221-

Purpose of Disbursement Sponsor

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2013

Amount of Each Disbursement this Period: 500.00

Transaction ID : 40107.E11305

SPONSOR

**SUBTOTAL** of Disbursements This Page (optional) ..... 1682.87

**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 86			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. State Farm Insurance</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address Insurance Support Center P.O. Box 588002		Amount of Each Disbursement this Period 538.27
City North Metro	State GA Zip Code 30029-8002	
Purpose of Disbursement Campaign vehicle insurance		Transaction ID : 40107.E11273
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CAMPAIGN VEHICLE INSURANCE
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Marcy Strutz Enchanting Childrens Party</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2013
Mailing Address 101 Alden Rd.		Amount of Each Disbursement this Period 575.00
City Carnegie	State PA Zip Code 15106-	
Purpose of Disbursement Professional Services-DFC picnic		Transaction ID : 31007.E11180
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PROFESSIONAL SERVICES-DFC PICNIC
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. The Thomas Merton Center</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address 5129 Penn Avenue		Amount of Each Disbursement this Period 100.00
City Pittsburgh	State PA Zip Code 15224-	
Purpose of Disbursement Ad		Transaction ID : 31018.E11207
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	AD
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1213.27
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 86			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Sam Thong Caricatures</b>			Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>06</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		06		2013
M M	/	D D	/	Y Y Y Y									
10		06		2013									
Mailing Address 6 Lisa Drive			Amount of Each Disbursement this Period <table border="1"> <tr> <td>400.00</td> </tr> </table>	400.00									
400.00													
City Washington	State PA	Zip Code 15301-											
Purpose of Disbursement Professional Services-DFC picnic		Category/ Type	<b>Transaction ID : 31007.E11181</b>										
Candidate Name													
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>PROFESSIONAL SERVICES-DFC PICNIC</b>										
State: District:													

Full Name (Last, First, Middle Initial) <b>B. Twenty First Century Group</b>			Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>03</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		03		2013
M M	/	D D	/	Y Y Y Y									
11		03		2013									
Mailing Address 434 New Jersey Avenue, SE			Amount of Each Disbursement this Period <table border="1"> <tr> <td>1750.00</td> </tr> </table>	1750.00									
1750.00													
City Washington	State DC	Zip Code 20003-											
Purpose of Disbursement Fundraiser-food/bev.		Category/ Type	<b>Transaction ID : 31116.E11258</b>										
Candidate Name													
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>FUNDRAISER-FOOD/BEV.</b>										
State: District:													

Full Name (Last, First, Middle Initial) <b>c. Venture Outdoors</b>			Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>06</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		06		2013
M M	/	D D	/	Y Y Y Y									
10		06		2013									
Mailing Address 33 Terminal Way, Suite 537E			Amount of Each Disbursement this Period <table border="1"> <tr> <td>600.00</td> </tr> </table>	600.00									
600.00													
City Pittsburgh	State PA	Zip Code 15219-											
Purpose of Disbursement Balance due on rental-DFC picnic		Category/ Type	<b>Transaction ID : 31007.E11177</b>										
Candidate Name													
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>BALANCE DUE ON RENTAL-DFC PICNIC</b>										
State: District:													

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>2750.00</td> </tr> </table>	2750.00
2750.00		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 89.32
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Phone charges	Candidate Name	Transaction ID : 31018.E11193
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	PHONE CHARGES

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 50.00
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Modem charge	Candidate Name	Transaction ID : 31018.E11198
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	MODEM CHARGE

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 87.81
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Phone charges	Candidate Name	Transaction ID : 31116.E11257
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	PHONE CHARGES

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	227.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 50.00
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Modem charge	Candidate Name	Transaction ID : 31116.E11262
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	MODEM CHARGE

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 84.15
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Phone Charges	Candidate Name	Transaction ID : 40107.E11295
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	PHONE CHARGES

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 50.00
City Albany	State NY Zip Code 12212-5124	
Purpose of Disbursement Modem charge	Candidate Name	Transaction ID : 40107.E11298
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	MODEM CHARGE

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	184.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 86			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Dan Weaver</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2013
Mailing Address dba Trowver Ride Co. 2789 Anderson Morris		Amount of Each Disbursement this Period 650.00
City Niles	State OH	Zip Code 44446-
Purpose of Disbursement Rental - DFC Picnic	Category/ Type	
Candidate Name	Transaction ID : 31007.E11189	
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)	RENTAL - DFC PICNIC
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Zeo Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 2429 E. Carson St. Suite 310		Amount of Each Disbursement this Period 50.00
City Pittsburgh	State PA	Zip Code 15203-
Purpose of Disbursement Web update	Category/ Type	
Candidate Name	Transaction ID : 31007.E11182	
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)	WEB UPDATE
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Zeo Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address 2429 E. Carson St. Suite 310		Amount of Each Disbursement this Period 90.00
City Pittsburgh	State PA	Zip Code 15203-
Purpose of Disbursement Domain renewal & website hosting	Category/ Type	
Candidate Name	Transaction ID : 31116.E11261	
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)	DOMAIN RENEWAL & WEBSITE HOSTING
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	790.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 80 OF 86	
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Zeo Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 2429 E. Carson St. Suite 310		Amount of Each Disbursement this Period 20.00
City Pittsburgh	State PA Zip Code 15203-	
Purpose of Disbursement Website Hosting	Candidate Name	Transaction ID : 40107.E11311
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	WEBSITE HOSTING

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	20.00
<b>TOTAL</b> This Period (last page this line number only).....	51657.22

**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 86
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Nabhi Christian Ministries</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address P.O. Box 24011		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : 40107.E11296</b>
City Pittsburgh	State PA	
Zip Code 15206-	Purpose of Disbursement DONATION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Bloomfield Citizens Council</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2013
Mailing Address c/o Janet Scullion 4737 Friendship Avenue		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : 31116.E11225</b>
City Pittsburgh	State PA	
Zip Code 15224-	Purpose of Disbursement DONATION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Friends of Dan Gilman</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address PO Box 90311		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : 31007.E11137</b>
City Pittsburgh	State PA	
Zip Code 15224-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 86
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Friends of Deb Gross</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address PO Box 40359		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 31018.E11216</b>
City Pittsburgh	State PA	
Zip Code 15201-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. 29th Ward Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 119 Kirk Avenue		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : 40107.E11271</b>
City Pittsburgh	State PA	
Zip Code 15227-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. 7th Ward Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2013
Mailing Address c/o Jeanne Clark 414 Stratton Lane		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : 31116.E11231</b>
City Pittsburgh	State PA	
Zip Code 15206-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 86			
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Churchill Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2013
Mailing Address c/o Bonnie Pantlik 884 Graham Blvd.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : 31018.E11202</b>
City Pittsburgh	State PA Zip Code 15221-	
Purpose of Disbursement CONTRIBUTION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dormont Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address c/o Harvey Lieberman 1801 New Haven		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : 31007.E11185</b>
City Pittsburgh	State PA Zip Code 15216-	
Purpose of Disbursement DONATION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Laura Pastor 4 City Council</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address P.O. Box 1988		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : 31018.E11203</b>
City Phoenix	State AZ Zip Code 85001-	
Purpose of Disbursement CONTRIBUTION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 86			
	<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)  
**Doyle for Congress Committee**

**A. Jack McVay For Judge**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 391

City Harrisburg State PA Zip Code 17108-  
Purpose of Disbursement CONTRIBUTION  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 07 / 2013

Amount of Each Disbursement this Period  
1000.00  
Transaction ID : 31018.E11196

**B. Childrens Hospital Free Care Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 4401 Penn Avenue  
Central Plant, Floor 3

City Pittsburgh State PA Zip Code 15224-  
Purpose of Disbursement DONATION  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 14 / 2013

Amount of Each Disbursement this Period  
500.00  
Transaction ID : 40107.E11299

**C. Friends of Ed Gainey**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 5208

City Pittsburgh State PA Zip Code 15206-  
Purpose of Disbursement CONTRIBUTION  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 14 / 2013

Amount of Each Disbursement this Period  
500.00  
Transaction ID : 31018.E11209

**SUBTOTAL** of Disbursements This Page (optional) ..... 2000.00

**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 86
	<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)  
**Doyle for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Ireland Institute of Pittsburgh</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2013
Mailing Address Investment Building 239 Fourth Avenue		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : 31116.E11220</b>
City Pittsburgh	State PA Zip Code 15222-	
Purpose of Disbursement DONATION	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Friends of Natalia Rudiak</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address P O Box 59375		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : 31007.E11140</b>
City Pittsburgh	State PA Zip Code 15210-	
Purpose of Disbursement CONTRIBUTION	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. People For Peduto</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address P.O. Box 9161		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : 31007.E11141</b>
City Pittsburgh	State PA Zip Code 15224-	
Purpose of Disbursement CONTRIBUTION	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5850.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 86	
	<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)  
**Doyle for Congress Committee**

**A. People to People**

Full Name (Last, First, Middle Initial)  
Mailing Address c/o Katrin Villinger  
2212 Hemlock Drive

City White Oak State PA Zip Code 15131-  
Purpose of Disbursement DONATION  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 27 / 2013

Amount of Each Disbursement this Period  
100.00  
Transaction ID : 31116.E11228

**B. Wilkinsburg Baseball Association**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 562

City Pittsburgh State PA Zip Code 15230-0562  
Purpose of Disbursement DONATION  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 27 / 2013

Amount of Each Disbursement this Period  
200.00  
Transaction ID : 31116.E11227

**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  
M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... 300.00

**TOTAL** This Period (last page this line number only)..... 13050.00