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Image# 15970163717

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	Fo	r An Authori	zed Comi	nittee			Office Use Only
NAME OF COMMITTEE (in		R PRINT ▼		ample: If typin or the lines.	g, type	12FE4M5	
Citizens for Bo	oyle						
<u> </u>							
	DO D	11515					
ADDRESS (number a		x 11545					
Check if di	fferent						
than previous reported. (A		lelphia				PA L	19116
2. FEC IDENTIFI	CATION NUMBER	_	CITY			STATE A	ZIP CODE
C C005433	63		IS THIS REPORT	× NEW	OR	AMENE (A)	STATE ▼ DISTRICT DED PA 13 PA 13
	PORT (Choose One	(b) 1	2-Day PRE-	Election Repo	ort for the:		
(a) Quarterly R	leports:		П	Primary (12P)		General (1	12G) Runoff (12R)
April 1	5 Quarterly Report (Q	1)	H		-		
July 15	Quarterly Report (Q2	2)		Convention (12C)	Special (1	28)
Octobe	er 15 Quarterly Report	(Q3)	Election on	M M /	D D /	YYYY	in the State of
X Januar	y 31 Year-End Report	(YE) (c) 3	0-Day POS	r -Election Rep	oort for the:		
				General (30G	i)	Runoff (30	DR) Special (30S)
Termina	ation Report (TER)		Election on	M M /	D D /	Y " Y " Y	in the State of
5. Covering Period	M M / D	25 / Y Y Y)14 Y	through	м м 12	/ D D /	Y Y Y Y Y 2014
I certify that I have o	examined this Repor	t and to the be	st of my kn	owledge and i	belief it is tr	ue, correct and	d complete.
Type or Print Name	of Treasurer Janic	a Kyriacopoulos					
Signature of Treasur	er <i>Janica Kyriaco</i>	poulos		[Electronically I	Filed] [Date 01	7 D D 7 Y Y Y Y Y Y 2015
NOTE: Submission of	false, erroneous, or i	ncomplete inforr	mation may s	subject the per	son signing t	this Report to tl	he penalties of 2 U.S.C. §437g.
Office			-				
Use Only							FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 19

Write or Type Committee Name

Citizens for Boyle

12 31 2014 25 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 24800.00 31825.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 24800.00 31825.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 13134.78 29374.19 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 13134.78 29374.19 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 415222.88 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 40000.00 Schedule C and/or Schedule D).....

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)

PAGE 3 / 19

Write or Type Committee Name

Citizens for Boyle

Report Covering the Period: From: MMM / DDD / YYYYY To: MMM / DDD / YYYYY TO: 12 31 2014

	I. RECEIPTS	I. RECEIPTS COLUMN A Total This Period		
11. C	ONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	500.00	1000.00	
	(ii) Unitemized	50.00	75.00	
	(iii) TOTAL of contributions from individuals	550.00	1075.00	
(b	,	0.00	0.00	
(C) Other Political Committees (such as PACs)	24250.00	30750.00	
(d (e) TOTAL CONTRIBUTIONS	0.00	0.00	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	24800.00	31825.00	
	RANSFERS FROM OTHER UTHORIZED COMMITTEES	0.00	0.00	
	DANS:			
(a) Made or Guaranteed by the Candidate	0.00	0.00	
(b	,	0.00	0.00	
(C) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00	
	FFSETS TO OPERATING XPENDITURES			
	Refunds, Rebates, etc.)	0.00	0.00	
	THER RECEIPTS Dividends, Interest, etc.)	22.18	22.18	
11	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	24822.18	31847.18	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	13134.78	29374.19
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	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	13134.78	29374.19
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	403535.48
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	24822.18
25.	SUBTOTAL (add Line 23 and Line 24)		428357.66
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	13134.78
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		415222.88

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 5 OF 19 (check only one) 11a 11b 11d 11c 12 13a 13b

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) Citizens for Boyle Full Name (Last, First, Middle Initial) Zachary Cryder Shaffer Esq. Date of Receipt Mailing Address 1738 S Mole St 2014 15 City State Zip Code Transaction ID: C10516336 PΑ 19145-2219 Philadelphia FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Montoya Shaffer LLC Attorney Receipt For: 2016 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Nathaniel J Webster Date of Receipt Mailing Address 137 Montgomery Dr 15 2014 City State Zip Code Transaction ID: C10516338 Harleysville PΑ 19438-2131 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Chief Executive Officer Warrior Diamond, Inc. Receipt For: 2016 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 500.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	F0	OR LINE	NU	MBER:	:	PAGE	:	6 OF	 19
Use separate schedule(s)	(c	heck only	or	ne)					
for each category of the		11a		11b	X	11c		11d	
Detailed Summary Page		12		13a		13b		14	15

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Citizens for Boyle		
Full Name (Last, First, Middle Initial) American Council of Engineering Co Mailing Address 1015 15TH ST. NW SUITE 802 City WASHINGTON	State Zip Code DC 20005	Date of Receipt 12 17 2014 Transaction ID : C10515312
FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2014 Primary General Other (specify)	C C00010868 Occupation Election Cycle-to-Date	Amount of Each Receipt this Period 1000.00 2014 Primary Debt Retirement
Full Name (Last, First, Middle Initial) ARENT FOX LLP PAC (AFPAC) Mailing Address 1717 K St NW ARENT FOX LLP City Washington	State Zip Code DC 20006-5343	Date of Receipt 12 17 2014 Transaction ID : C10516341
FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2016 Primary General Other (specify)	C C00241380 Occupation Election Cycle-to-Date 500.00	Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) ASSOCIATED EQUIPMENT DISTRIBUT Mailing Address 121 N HENRY STREET City ALEXANDRIA	State Zip Code VA 22314	Date of Receipt 12 17 2014 Transaction ID : C10515311
FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2014 Primary General Other (specify)	C C00010124 Occupation Election Cycle-to-Date	Amount of Each Receipt this Period 1000.00 2014 Primary Debt Retirement
SUBTOTAL of Receipts This Page (optional)		2500.00

SCHEDULE A TEMIZED REG	(FEC Form 3) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 19 (check only one) 11a 11b X 11c 11d 11d 12 13a 13b 14 15
				person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMM Citizens for E	,			
Full Name (Last, F BROTHERHOC Mailing Address 1 City CLEVELAND FEC ID number of federal political co	DD OF LOCOMOTIVE EN 370 ONTARIO ST f contributing	State OH	Zip Code 44113	Date of Receipt 12 09 2014 Transaction ID : C10514228 Amount of Each Receipt this Period
Name of Employer Receipt For: 2016 Primary Other (specific	r 6 General	Occupation Election C	ycle-to-Date	1000.00
Mailing Address 2	OMMITTEE FOR RESP 28 S. WASHINGTON ST. TE. 115	State VA	Zip Code 22314	Date of Receipt 12
Name of Employer		C Coo	0342394	Amount of Each Receipt this Period 1000.00
Receipt For: 2014 Primary Other (speci	General fy)	Election C	ycle-to-Date	2014 Primary Debt Retirement
Mailing Address 1	First, Middle Initial) OUNG POLITICAL A 101 NEW YORK AVENUE, N	IW State	Zip Code	Date of Receipt M
FEC ID number of federal political co	ommittee.	<u> </u>	20005	Amount of Each Receipt this Period 5000.00
Receipt For: 2014 Primary Other (specif	4 General	Occupation Election C	ycle-to-Date 5000.00	2014 Primary Debt Retirement
SUBTOTAL of Rece	ipts This Page (optional)			7000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FOR LINE NUMBER:	PAGE	8 OF	19
Use separate schedule(s)	(check only one)			
for each category of the	11a 11b X	11c	11d	
Detailed Summary Page	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) Citizens for Boyle Full Name (Last, First, Middle Initial)
EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC) Date of Receipt Mailing Address 5959 LAS COLINAS BLVD 2014 16 City State Zip Code Transaction ID: C10515332 TX 75039 **IRVING** FEC ID number of contributing Amount of Each Receipt this Period C00095406 federal political committee. 5000.00 Name of Employer Occupation Receipt For: 2014 Election Cycle-to-Date Primary General 2014 Primary Debt Retirement 5000.00 Other (specify) Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC. POLITICAL ACTION COMMITTEE Date of Receipt В.

		<u> </u>
Mailing Address 1875 I STREET, NW SUITE 600		12 15 2014
City	State Zip Code	Transaction ID : C10514055
WASHINGTON	DC 20006	Transaction is 1 of to 1 foot
FEC ID number of contributing federal political committee.	C C00303339	Amount of Each Receipt this Period
Name of Employer	Occupation	3500.00
Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 3500.00	2014 Primary Debt Retirement
Full Name (Last, First, Middle Initial) NATIONAL BEER WHOLESALERS ASSO	CIATION POLITICAL ACTION COMMITTEE	Date of Receipt
		1

Mailing Address 1101 KING STREET 12 09 2014 SUITE 600 City State Zip Code Transaction ID: C10514230 VA **ALEXANDRIA** 22314 FEC ID number of contributing С C00144766 Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation Receipt For: 2014 Election Cycle-to-Date Primary General 2014 Primary Debt Retirement 2500.00 Other (specify) 11000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FOR LINE NUMBER: PAGE 9 OF 19	
Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)	
, , , , , , , , , , , , , , , , , , , ,	person for the purpose of soliciting contributions e to solicit contributions from such committee.	

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and ad NAME OF COMMITTEE (In Full) Citizens for Boyle Full Name (Last, First, Middle Initial) National Emergency Medicine PAC Date of Receipt Mailing Address 1125 EXECUTIVE CIRCLE 2014 16 City State Zip Code Transaction ID: C10515330 TX 75038 **IRVING** FEC ID number of contributing Amount of Each Receipt this Period C00140061 federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2014 Election Cycle-to-Date Primary General 2014 Primary Debt Retirement 1000.00 Other (specify) Full Name (Last, First, Middle Initial)
PENNSYLVANIA FOODPAC (PA FOOD MERCHANTS ASSN/PA CONVENIENCE STORE COUNCIL) Date of Receipt Mailing Address 1029 MUMMA RD 11 2014 City State Zip Code Transaction ID: C10516340 WORMLEYSBURG PΑ 17043 FEC ID number of contributing C C00345660 Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE Date of Receipt Mailing Address 805 FIFTEENTH ST NW SUITE 430 2014 12 09 City Zip Code State Transaction ID: C10514229 WASHINGTON DC 20005 FEC ID number of contributing С C00147173 Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation Receipt For: 2014 Election Cycle-to-Date Primary General 2014 Primary Debt Retirement Other (specify) 2500.00 3750.00 SUBTOTAL of Receipts This Page (optional)..... 24250.00 TOTAL This Period (last page this line number only).....

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sche for each category Detailed Summary	edule(s) (of the	FOR LINE NUMBER: PAGE 10 OF 19 check only one) X 17
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and			
\rangle	NAME OF COMMITTEE (In Full) Citizens for Boyle			
۱.	Full Name (Last, First, Middle Initial) Carly Frame Mailing Address 440 Christins Dr.			Date of Disbursement 12 01 2014
	Mailing Address 119 Christine Dr City State Downingtown PA Purpose of Disbursement	Zip Code 19335-1516		Amount of Each Disbursement this Period 730.15
	Payroll Candidate Name		Category/ Type	Transaction ID : D508098
	Office Sought: House Senate President State: Disbursement For Primary Other (s	General	,,	
3.	Full Name (Last, First, Middle Initial) Carly Frame Mailing Address 119 Christine Dr			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Downingtown PA Purpose of Disbursement Payroll Candidate Name	Zip Code 19335-1516	Category/	Amount of Each Disbursement this Period 730.15 Transaction ID: D509721
	Office Sought: House Disbursement For Senate Primary President Other (s	General	Type	
) .	Full Name (Last, First, Middle Initial) Carly Frame Mailing Address 119 Christine Dr			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	-	p Code 9335-1516	Category/ Type	Amount of Each Disbursement this Period 730.15 Transaction ID: D510162
	Office Sought: House Disbursement For	General		
				2400.45

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

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 19 (check only one) X 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		any person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Citizens for Boyle		
Full Name (Last, First, Middle Initial) Mr. Scott H Heppard Mailing Address 225 Loring Ct		Date of Disbursement 12 31 2014
City State Sewell NJ Purpose of Disbursement Payroll Candidate Name Office Sought: House Senate President President Other State: District:	or: 2016	Amount of Each Disbursement this Period 1019.54 Transaction ID : D510163
Full Name (Last, First, Middle Initial) Mr. Scott H Heppard Mailing Address 225 Loring Ct		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Sewell NJ Purpose of Disbursement Payroll Candidate Name Office Sought: House Senate President State: District:	or: 2016	Amount of Each Disbursement this Period 1019.55 Transaction ID : D509723
Full Name (Last, First, Middle Initial) Mr. Scott H Heppard Mailing Address 225 Loring Ct		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Sewell NJ Purpose of Disbursement Payroll Candidate Name Office Sought: House Disbursement F	Ту	Amount of Each Disbursement this Period 1019.56 Transaction ID : D508100
Senate Primar		
SUBTOTAL of Disbursements This Page (optional)		3058.65

SCHEDULE B (FEC Forr ITEMIZED DISBURSEMEI

President

In	nage# 15970163728			
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sc for each categor Detailed Summa	hedule(s) ry of the	FOR LINE NUMBER: PAGE 12 OF 19 (check only one) X 17
	ny information copied from such Reports and Statements for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) Citizens for Boyle			
A .	Full Name (Last, First, Middle Initial) Jaci Downs Photography Mailing Address 87 Walnut St		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State Conshohocken PA Purpose of Disbursement 2014 Event Photography Services	Zip Code 19428-1955		Amount of Each Disbursement this Period 325.00 Transaction ID: D508127
			Category/ Type	Transaction is . 5500127
В.	State: District: Full Name (Last, First, Middle Initial) Kennedy Communications Mailing Address 926 N St NW Studio R7			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Zip Code Washington DC 20001-4485 Purpose of Disbursement Design & Printing Services - 2014 Primary Debt			Amount of Each Disbursement this Period 1664.00 Transaction ID: D509936
	Candidate Name Office Sought: House Senate President Other State: District:		Category/ Type	
C.	Full Name (Last, First, Middle Initial) Liberty Building Associates Mailing Address 13050 Bustleton Ave			Date of Disbursement M M M / D D / Y Y Y Y Y Y 12 12 01 2014
	City			

c. Liberty Building Associate

Mailing Address 13050 Bustleton Av City Zip Code Philadelphia PΑ 19116-1631 Purpose of Disbursement Office Rent Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General

Amount of Each Disbursement this Period 900.00

Transaction ID: D508121

State:	District:												
CURTOTAL	of Dishumannanta This Dage	(antional)		T			T				288	39.00	
SUBTUTAL	of Disbursements This Page	(optional)	- 1	÷	÷	7	÷	÷	7	+	+	+	=
TOTAL This	Period (last page this line nu	mber only)	L	_	_	-	_	_	-	_	_	_	

Other (specify)

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sched for each category of Detailed Summary	dule(s) (c of the	OR LINE NUMBER: PAGE 13 OF 19 Check only one) X 17
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and			rson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) Citizens for Boyle			
۱.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 911 Panorama Trl S			Date of Disbursement 12 01 2014
	City State Rochester NY Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: House Senate President President State: District: Full Name (Last, First, Middle Initial)	General	Category/ Type	Amount of Each Disbursement this Period 762.13 Transaction ID: D508094
3.	Paychex, Inc. Mailing Address 911 Panorama Trl S			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Rochester NY Purpose of Disbursement Payroll Processing Fee Candidate Name Office Sought: House Disbursement For		Category/ Type	Amount of Each Disbursement this Period 73.15 Transaction ID: D508096
	Senate Primary President Other (s			
Э.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 911 Panorama Trl S			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	p Code 4625-2311	Category/	Amount of Each Disbursement this Period 73.15 Transaction ID: D510160
	Office Sought: House Senate President State: Disbursement For Primary Other (s	General	Type	
_	State: District:			908.43

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule for each category of to Detailed Summary Page	e(s) (ch	PR LINE NUMBER: PAGE 14 OF 19 PAGE 14 OF 19
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and			
NAME OF COMMITTEE (In Full) Citizens for Boyle			
Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 911 Panorama Trl S			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Rochester NY Purpose of Disbursement Payroll Taxes	Zip Code 14625-2311		Amount of Each Disbursement this Period 762.15 Transaction ID: D510161
Candidate Name Office Sought: House Disbursement F Senate President Other State: District:	or: 2016	ategory/ Type	Transaction in . D310101
Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 911 Panorama Trl S			Date of Disbursement M M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
City State Rochester NY Purpose of Disbursement Payroll Processing Fee Candidate Name	Zip Code 14625-2311	ategory/	Amount of Each Disbursement this Period 73.15 Transaction ID : D509718
Office Sought: House Senate President State: Disbursement F Primal Other		Туре	
Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 911 Panorama Trl S			Date of Disbursement M M / D D / Y Y Y Y Y Y Y 15 15 2014
City State Rochester NY Purpose of Disbursement Payroll Taxes Candidate Name	Zip Code 14625-2311	ategory/ Type	Amount of Each Disbursement this Period 762.14 Transaction ID : D509720
Office Sought: House Disbursement F		. Open	1507 ::
SUBTOTAL of Disbursements This Page (optional)			1597.44

		B (FEC Form SBURSEMEN	-	Use separate sch for each category Detailed Summar	nedule(s) y of the	FOR LINE NUMBER: PAGE 15 OF 19 (check only one)
				ay not be sold or	used by any p	erson for the purpose of soliciting contributions to solicit contributions from such committee.
<u>S.</u>	NAME OF COM	MITTEE (In Full)	asing the hame that t	address of any pen		o to conort continuations were continuated.
Α.	Full Name (Last, First, Middle Initial) A. Prudential Financial					Date of Disbursement
	Mailing Address	751 Broad St 14th Floor, External A	Affairs			12 08 2014
	City Elizabeth		State NJ	Zip Code 07201		Amount of Each Disbursement this Period
	Purpose of Disb Event Space	ursement				250.00 Transaction ID : D509167
	Candidate Name)			Category/ Type	Transaction in . D309107
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General	31.	
_	State: Full Name (Last.	District: First, Middle Initial)				
В.	•	oldings LLC				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City		State	Zip Code		Amount of Each Disbursement this Period
	Washington Purpose of Disb	ursement	DC	20003		250.00
	Event Space Candidate Name				Category/ Type	Transaction ID : D509136
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General	Туре	
	State:	District:				
C.	Full Name (Last, Mr. Scott H	First, Middle Initial) I Heppard				Date of Disbursement
	Mailing Address	225 Loring Ct				12 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sewell			p Code 8080-3005		Amount of Each Disbursement this Period
	Purpose of Disb Reimbursement Candidate Name				Category/ Type	195.08 Transaction ID : D509253
	Office Sought:	House Senate President	Disbursement For Primary Other (s	X General	, , , , , , , , , , , , , , , , , , ,	
_	State:	District:				
						695.08

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

SCHEDULE B (FEC Form 3)

PAGE 16 OF 19 FOR LINE NUMBER: Use separate schedule(s) for each category of the (check only one)

ı	EMIZED DISBURSEMENTS	Detailed Summar		X 17 18 19a 19b 20c 21			
	ny information copied from such Reports and Statements m for commercial purposes, other than using the name and a			erson for the purpose of soliciting contributions			
\rangle	NAME OF COMMITTEE (In Full) Citizens for Boyle						
۹.	Full Name (Last, First, Middle Initial) Rep Brendan Boyle Mailing Address PO Box 11545			Date of Disbursement M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y			
	City State Philadelphia PA Purpose of Disbursement Reimbursement	Zip Code 19116		Amount of Each Disbursement this Period 491.30			
	Candidate Name Rep Brendan Boyle	0040	Category/ Type	Transaction ID: D509554			
	Office Sought: House Disbursement For	General					
3.	Full Name (Last, First, Middle Initial) The Fitz			Date of Disbursement			
	Mailing Address 687 Lexington Avenue		12 15 2014				
	City State New York NY	Zip Code 10022		Amount of Each Disbursement this Period			
	Purpose of Disbursement Catering			491.30 Transaction ID : D509555			
	Candidate Name		Category/ Type	[MEMO ITEM]			
	Office Sought: House Senate President Disbursement For Primary Other (s	General					
_	Full Name (Last, First, Middle Initial)			Date of Disbursement			
j.	Mailing Address			M M / D D / Y Y Y			
	City State Zi	p Code		Amount of Each Disbursement this Period			
Purpose of Disbursement							
	Candidate Name		Category/ Type				
	Office Sought: House Senate President State: Disbursement For Primary Other (s	General					
-	SUBTOTAL of Disbursements This Page (optional)						
	TOTAL This Period (last page this line number only)						
•	- The remove have page the mile namber only)			,			

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

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(check only one) Detailed Summary Page Transaction ID: L927 NAME OF COMMITTEE (In Full) Citizens for Boyle LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Rep Brendan Boyle General Mailing Address Other (specify) \blacktriangledown PO Box 11545 City State ZIP Code PΑ 19116 Philadelphia Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 30000.00 40000.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 07 ^M 05^M ž014 0.00 No Due Date % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

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×	13a
	13b

19

(check only one) Detailed Summary Page Transaction ID: L929 NAME OF COMMITTEE (In Full) Citizens for Boyle LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Rep Brendan Boyle General Mailing Address Other (specify) \blacktriangledown PO Box 11545 State ZIP Code City PΑ 19116 Philadelphia Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 30000.00 0.00 30000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 19^D ^M 05^M ž014 0.00 No Due Date % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 30000.00 TOTALS This Period (last page in this line only) 40000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 19 OF FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Citizens for Boyle		
A. Full Name (Last, First, Middle Initial) of Debtor Kennedy Communications	r or Creditor	Nature of Debt (Purpose): Design & Printing Services - 2014 Primary Debt
Mailing Address 926 N St NW Studio R7		
City State Washington	Zip Code DC 20001-4485	
Outstanding Balance Beginning This Period 1664.00		Transaction ID : D483005
Amount Incurred This Period 0.00	Payment This Period 1664.00	Outstanding Balance at Close of This Period 0.00
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	_
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Nature of Debt (Purpose):
Mailing Address		_
City	State Zip Code	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	7	
1) SUBTOTALS This Period This Page (optional)	>	0.00
2) TOTALS This Period (last page this line number	only)	0.00
3) TOTAL OUTSTANDING LOANS from Schedule (C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate	, , , , , , , , , ,	