



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Kevin Strouse for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	44278.29	764864.67
(b) Total Contribution Refunds (from Line 20(d)) .....	375.00	375.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	43903.29	764489.67
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	191672.94	398691.50
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	6.43
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	191672.94	398685.07
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	415804.68	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	50000.00	

**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

**Kevin Strouse for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	28320.90	486505.89
(ii) Unitemized.....	9945.20	95129.43
(iii) TOTAL of contributions from individuals ▶	38266.10	581635.32
(b) Political Party Committees.....	0.00	890.83
(c) Other Political Committees (such as PACs).....	6002.19	85202.19
(d) The Candidate.....	10.00	97136.33
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	44278.29	764864.67
<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	50000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	50000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	6.43
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.08
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	44278.29	814871.18

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	191672.94	398691.50
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 .....	375.00	375.00
(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)).....	375.00	375.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	192047.94	399066.50

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	563574.33
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	44278.29
25. SUBTOTAL (add Line 23 and Line 24).....	607852.62
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	192047.94
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	415804.68

**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 66  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Kevin Strouse for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carolyn T. Adams**

Mailing Address 137 W Harvey St

City Philadelphia State PA Zip Code 19144-2721

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

Name of Employer Temple University Occupation College Professor

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  
**04 / 07 / 2014**

**Transaction ID : VN8JKCKD2G6**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 275 Springdale Ter Yardley

City Yardley State PA Zip Code 19067-3422

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

Name of Employer not employed Occupation not employed

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **201.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 25 / 2014**

**Transaction ID : VN8JKCNW821**

Amount of Each Receipt this Period  
**9.00**

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

Mailing Address 5280 Militia Hill Rd

City Plymouth Meeting State PA Zip Code 19462-1217

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

Name of Employer Not employed Occupation Not employed

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  
**04 / 30 / 2014**

**Transaction ID : VN8JKCP8J17**

Amount of Each Receipt this Period  
**500.00**

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

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

**609.00**

**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 626B Rose Hollow Dr  
# B

City Yardley State PA Zip Code 19067-6330

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

Name of Employer Almac clinical technologies Occupation computer programmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
206.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 24 / 2014

**Transaction ID : VN8JKCNW6D2**

Amount of Each Receipt this Period  
12.00

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

Mailing Address 626B Rose Hollow Dr  
# B

City Yardley State PA Zip Code 19067-6330

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

Name of Employer Almac clinical technologies Occupation computer programmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
211.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 28 / 2014

**Transaction ID : VN8JKCP8ED4**

Amount of Each Receipt this Period  
5.00

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

Mailing Address 77 Hampton Rd

City Garden City State NY Zip Code 11530-2709

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

Name of Employer none Occupation none

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 15 / 2014

**Transaction ID : VN8JKCNE8Q4**

Amount of Each Receipt this Period  
100.00

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

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

117.00

**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 306 S 3rd St

City Philadelphia State PA Zip Code 19106-4229

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 09 / 2014

**Transaction ID : VN8JKCM8B42**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 145 Naomi Ct

City Levittown State PA Zip Code 19057-3635

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 14 / 2014

**Transaction ID : VN8JKCNE6E0**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 5337 Buxton Ct

City Alexandria State VA Zip Code 22315-4760

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

Name of Employer Avascent Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 16 / 2014

**Transaction ID : VN8JKCN5393**

Amount of Each Receipt this Period  
 25.00

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

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

575.00

**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 202 Bellevue St

City State Zip Code  
Newton MA 02458-1813

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

Name of Employer Occupation  
Spaulding Rehabilitation Network Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 06 / 2014

**Transaction ID : VN8JKCK4197**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2233 Caton Ave  
Apt 3C

City State Zip Code  
Brooklyn NY 11226-2586

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

Name of Employer Occupation  
Hage Engineering PC Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1085.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 25 / 2014

**Transaction ID : VN8JKCNW987**

Amount of Each Receipt this Period  
35.00

**C.** Full Name (Last, First, Middle Initial)  
**CL King & Associates**

Mailing Address 9 Elk St

City State Zip Code  
Albany NY 12207-1002

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  
04 / 21 / 2014

**Transaction ID : VN8JKCNDKZ4**

Amount of Each Receipt this Period  
2000.00

LLC - Members below if itemized. Permissible funds.

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

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

2285.00



**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 66
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ryan Long</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 5300 Neshaminy Blvd Apt 1454		<b>Transaction ID : VN8JKCQ0ZG4</b>	
City Bensalem	State PA	Zip Code 19020-1225	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		[MEMO ITEM] *	
Name of Employer Kevin Strouse for Congress	Occupation Finance Assistant		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00		

Full Name (Last, First, Middle Initial) <b>B. Ryan Long</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 5300 Neshaminy Blvd Apt 1454		<b>Transaction ID : VN8JKCQ0ZH1</b>	
City Bensalem	State PA	Zip Code 19020-1225	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		[MEMO ITEM] *	
Name of Employer Kevin Strouse for Congress	Occupation Finance Assistant		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00		

Full Name (Last, First, Middle Initial) <b>C. Elizabeth K. Clyne</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2014	
Mailing Address 30 Haswell Greene Rd		<b>Transaction ID : VN8JKCNAF06</b>	
City Delmar	State NY	Zip Code 12054-9777	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		[MEMO ITEM] *	
Name of Employer Featherstonhaugh, Wiley & Clyne, LLP	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2600.00
<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 10 OF 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 900 N Stuart St  
Apt 1416

City State Zip Code  
Arlington VA 22203-4110

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 04 / 2014

**Transaction ID : VN8JKCHZ1K3**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 105 W 13th St  
Apt 7G

City State Zip Code  
New York NY 10011-7843

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

Name of Employer Occupation  
Metropolitan Capital Financial Services

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 22 / 2014

**Transaction ID : VN8JKCNHBD6**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 32 Alexander St

City State Zip Code  
Alexandria VA 22314-3873

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

Name of Employer Occupation  
The SeaMarsh Group, Inc. President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 22 / 2014

**Transaction ID : VN8JKCNW5P3**

Amount of Each Receipt this Period  
100.00

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 11 OF 66  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Kevin Strouse for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William De Puy**

Mailing Address 32 Alexander St

City State Zip Code  
Alexandria VA 22314-3873

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

Name of Employer Occupation  
The SeaMarsh Group, Inc. President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : VN8JKCP8JK9**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 150 W 56th St  
Apt 4803

City State Zip Code  
New York NY 10019-3846

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

Name of Employer Occupation  
Aditi, Inc Consultant

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 26 / 2014**

**Transaction ID : VN8JKCNT4A8**

Amount of Each Receipt this Period  
**300.00**

**C.** Full Name (Last, First, Middle Initial)  
**John Joseph Devlin Jr**

Mailing Address 2036 Roosevelt Blvd

City State Zip Code  
Hatfield PA 19440-2756

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

Name of Employer Occupation  
Anthony & Sylvan Pools Design Consultant

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 18 / 2014**

**Transaction ID : VN8JKCNEBZ4**

Amount of Each Receipt this Period  
**100.00**

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

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

**450.00**

**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 66
	<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)  
**Kevin Strouse for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert D Eckel**

Mailing Address 1775 Meadow Rd

City Southampton State PA Zip Code 18966-4559

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **205.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 15 / 2014

**Transaction ID : VN8JKCNE6T5**

Amount of Each Receipt this Period  
**10.00**

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

Mailing Address 1775 Meadow Rd

City Southampton State PA Zip Code 18966-4559

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 24 / 2014

**Transaction ID : VN8JKCNN6B0**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 1775 Meadow Rd

City Southampton State PA Zip Code 18966-4559

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : VN8JKCNRTC6**

Amount of Each Receipt this Period  
**10.00**

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

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

**45.00**

**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 66
	<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)  
**Kevin Strouse for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert D Eckel**

Mailing Address 1775 Meadow Rd

City Southampton State PA Zip Code 18966-4559

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : VN8JKCNW8D8**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 1775 Meadow Rd

City Southampton State PA Zip Code 18966-4559

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
260.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8JKCP8F61**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 167 Old Army Rd

City Scarsdale State NY Zip Code 10583-2645

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : VN8JKCMSAH5**

Amount of Each Receipt this Period  
1000.00

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

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

1020.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 1204 Crespo Ln  
Crespo Lane

City Bensalem State PA Zip Code 19020-4734

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

Name of Employer Knight medical associates Occupation MD

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8JKCP2MS3**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 68 New St

City New Hope State PA Zip Code 18938-1244

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 24 / 2014

**Transaction ID : VN8JKCNW6T5**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 133 2nd Ave  
Apt 5

City New York State NY Zip Code 10003-8372

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

Name of Employer Viacom Occupation Strategy

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 26 / 2014

**Transaction ID : VN8JKCNT4K9**

Amount of Each Receipt this Period  
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 220 W Rittenhouse Sq  
Apt 12D

City Philadelphia State PA Zip Code 19103-5737

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

Name of Employer physician Occupation U. of Penn

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : VN8JKNECX1**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 220 W Rittenhouse Sq  
Apt 12D

City Philadelphia State PA Zip Code 19103-5737

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

Name of Employer physician Occupation U. of Penn

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
215.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : VN8JKCNW566**

Amount of Each Receipt this Period  
5.00

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

Mailing Address 220 W Rittenhouse Sq  
Apt 12D

City Philadelphia State PA Zip Code 19103-5737

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

Name of Employer physician Occupation U. of Penn

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8JKCP8F46**

Amount of Each Receipt this Period  
5.00

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

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

20.00

**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 220 W Rittenhouse Sq  
Apt 12D

City Philadelphia State PA Zip Code 19103-5737

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

Name of Employer physician Occupation U. of Penn

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 29 / 2014

**Transaction ID : VN8JKCP8F79**

Amount of Each Receipt this Period  
5.00

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

Mailing Address 764 Mount Pleasant Rd

City Bryn Mawr State PA Zip Code 19010-1847

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 30 / 2014

**Transaction ID : VN8JKCP8MD6**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1 Maplewood Dr

City Newtown Square State PA Zip Code 19073-3945

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  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 15 / 2014

**Transaction ID : VN8JKCNE7D3**

Amount of Each Receipt this Period  
100.00

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

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

205.00



**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 563 Warwick Rd

City Haddonfield State NJ Zip Code 08033-3845

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

Name of Employer Fortna, Inc. Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8JKCP8GP8**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 21 Tunbridge Rd

City Haverford State PA Zip Code 19041-1038

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

Name of Employer Centura Capital Occupation Real Estate Investment Mgr

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 07 / 2014

**Transaction ID : VN8JKCMY593**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 6 Almond Cluster

City Doylestown State PA Zip Code 18901-2145

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

Name of Employer none Occupation none

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : VN8JKCNV983**

Amount of Each Receipt this Period  
100.00

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

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

175.00

**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 66
	<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)  
**Kevin Strouse for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Beverly M Hahn**

Mailing Address 1621 Winchester Dr

City State Zip Code  
Blue Bell PA 19422-3527

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

Name of Employer none Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 02 / 2014

**Transaction ID : VN8JKCHF49**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1621 Winchester Dr

City State Zip Code  
Blue Bell PA 19422-3527

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

Name of Employer none Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2014

**Transaction ID : VN8JKCP8MN9**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2921 N 2nd St

City State Zip Code  
Harrisburg PA 17110-1209

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

Name of Employer WCI Partners Occupation business owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 08 / 2014

**Transaction ID : VN8JKCMY6A4**

Amount of Each Receipt this Period  
250.00

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

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

450.00

**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 500 Philadelphia Blvd

City State Zip Code  
Sea Girt NJ 08750-2612

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

Name of Employer Occupation  
None None

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 04 / 2014

**Transaction ID : VN8JKCEJ1J5**

Amount of Each Receipt this Period  
2600.00

**[MEMO ITEM]**  
\*

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

Mailing Address 500 Philadelphia Blvd

City State Zip Code  
Sea Girt NJ 08750-2612

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

Name of Employer Occupation  
None None

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 04 / 2014

**Transaction ID : VN8JKCPSMN3**

Amount of Each Receipt this Period  
-2600.00

**[MEMO ITEM]**  
\*

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

Mailing Address 304 S 12th St

City State Zip Code  
Phila PA 19107-5908

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

Name of Employer Occupation  
self GLBT real estate mgt.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 28 / 2014

**Transaction ID : VN8JKCP8ET7**

Amount of Each Receipt this Period  
100.00

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

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

100.00

**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 20 OF 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 30 E End Ave  
Apt 3C

City New York State NY Zip Code 10028-7098

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
201.25

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 12 / 2014

**Transaction ID : VN8JKCMY7W7**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 30 E End Ave  
Apt 3C

City New York State NY Zip Code 10028-7098

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
201.25

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 12 / 2014

**Transaction ID : VN8JKCMY8W9**

Amount of Each Receipt this Period  
6.25

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

Mailing Address 30 E End Ave  
Apt 3C

City New York State NY Zip Code 10028-7098

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
206.25

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8JKCP8G04**

Amount of Each Receipt this Period  
5.00

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

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

36.25

**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 30 E End Ave  
Apt 3C

City New York State NY Zip Code 10028-7098

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**231.25**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : VN8JKCP8G37**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 130 Great Circle Dr

City Mill Valley State CA Zip Code 94941-3208

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

Name of Employer CORE Occupation Educator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 28 / 2014**

**Transaction ID : VN8JKCP8DP2**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 1010 Jaeger St

City Columbus State OH Zip Code 43206-2625

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

Name of Employer Ohio State university Occupation genetics research

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**235.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 28 / 2014**

**Transaction ID : VN8JKCP8DQ0**

Amount of Each Receipt this Period  
**100.00**

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

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

**625.00**

**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 66
	<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)  
**Kevin Strouse for Congress**

**A. Lawrence Hui**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 W 72nd St  
 Apt 804  
 City New York State NY Zip Code 10023-4100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kleinberg Kaplan Occupation Attorney  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 26 / 2014  
**Transaction ID : VN8JKCNT4D1**  
 Amount of Each Receipt this Period  
 500.00

**B. Mary Hunter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32 S Chancellor St  
 City Newtown State PA Zip Code 18940-2108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 04 / 2014  
**Transaction ID : VN8JKCJ92D6**  
 Amount of Each Receipt this Period  
 100.00

**C. Lisa Hydes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 632 Psc 476  
 City Fpo State AP Zip Code 96322-0007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Homemaker  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 325.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 14 / 2014  
**Transaction ID : VN8JKCMVT02**  
 Amount of Each Receipt this Period  
 25.00

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

625.00

**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 632 Psc 476

City State Zip Code  
Fpo AP 96322-0007

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

Name of Employer Occupation  
United States Navy Psychologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**325.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 14 / 2014**

**Transaction ID : VN8JKCMVSY6**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 360 Renninger Rd

City State Zip Code  
Perkiomenville PA 18074-9628

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

Name of Employer Occupation  
BIA Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 14 / 2014**

**Transaction ID : VN8JKCNE667**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 167 E 74th St

City State Zip Code  
New York NY 10021-3226

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 08 / 2014**

**Transaction ID : VN8JKCKNGV4**

Amount of Each Receipt this Period  
**250.00**

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

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

**325.00**

**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 66
	<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)  
**Kevin Strouse for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas S Johnston**

Mailing Address 4690 Pioneer Rd

City Medford State OR Zip Code 97501-9685

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

Name of Employer none Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 28 / 2014**

**Transaction ID : VN8JKCP8DB5**

Amount of Each Receipt this Period  
**125.00**

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

Mailing Address 52 E 4th St Apt 6

City New York State NY Zip Code 10003-9476

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

Name of Employer Pura Vida Investments Occupation portfolio manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : VN8JKCP6MG2**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 466 Mississippi River Blvd S

City Saint Paul State MN Zip Code 55105-1324

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

Name of Employer RKMC 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  
**04 / 24 / 2014**

**Transaction ID : VN8JKCNN2Z9**

Amount of Each Receipt this Period  
**500.00**

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

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

**1125.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 66
	<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)  
**Kevin Strouse for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John J Kent**

Mailing Address 6419 Moorings Point Cir  
Unit 201

City Lakewood Ranch State FL Zip Code 34202-1201

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 03 / 2014

**Transaction ID : VN8JKCHNZX8**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 6727 Woods Creek Dr

City Charlevoix State MI Zip Code 49720-9395

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

Name of Employer Information Requested Occupation Information Requested  
N/A N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 21 / 2014

**Transaction ID : VN8JKCNEYQ2**

Amount of Each Receipt this Period  
350.00

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

Mailing Address 6727 Woods Creek Dr

City Charlevoix State MI Zip Code 49720-9395

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

Name of Employer Information Requested Occupation Information Requested  
N/A N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 21 / 2014

**Transaction ID : VN8JKCNF665**

Amount of Each Receipt this Period  
350.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 47 W 12th St  
Apt 1

City New York State NY Zip Code 10011-8566

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

Name of Employer Jane Street Capital Occupation Trader

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 14 / 2014

**Transaction ID : VN8JKCNE5G3**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2 Rigger Ct

City Huntington Station State NY Zip Code 11746-2828

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

Name of Employer Publishers Clearing House Occupation Creative Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2183.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2014

**Transaction ID : VN8JKCNW979**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 230 Spruce St

City Philadelphia State PA Zip Code 19106-4322

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 07 / 2014

**Transaction ID : VN8JKCMY5B9**

Amount of Each Receipt this Period  
25.00

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

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

225.00

**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 8612 Tebbs Ln

City McLean State VA Zip Code 22102-1212

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

Name of Employer none Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **752.08**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 07 / 2014**

**Transaction ID : VN8JKCMY5C7**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 8612 Tebbs Ln

City McLean State VA Zip Code 22102-1212

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

Name of Employer none Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **814.58**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 12 / 2014**

**Transaction ID : VN8JKCMY8Z3**

Amount of Each Receipt this Period  
**62.50**

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

Mailing Address 8612 Tebbs Ln

City McLean State VA Zip Code 22102-1212

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

Name of Employer none Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1064.58**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 15 / 2014**

**Transaction ID : VN8JKCNE7P4**

Amount of Each Receipt this Period  
**250.00**

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

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

**562.50**

**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 8612 Tebbs Ln

City McLean State VA Zip Code 22102-1212

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

Name of Employer none Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1112.31**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 16 / 2014**

**Transaction ID : VN8JKCNE829**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 8612 Tebbs Ln

City McLean State VA Zip Code 22102-1212

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

Name of Employer none Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1112.31**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 16 / 2014**

**Transaction ID : VN8JKCNE8F1**

Amount of Each Receipt this Period  
**22.73**

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

Mailing Address 8612 Tebbs Ln

City McLean State VA Zip Code 22102-1212

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

Name of Employer none Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1362.31**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 23 / 2014**

**Transaction ID : VN8JKCNW600**

Amount of Each Receipt this Period  
**250.00**

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

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

**297.73**

**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 3517 13th St NW  
Apt 301

City Washington State DC Zip Code 20010-2077

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

Name of Employer US government Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
236.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : VN8JKCP8HT2**

Amount of Each Receipt this Period  
8.00

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

Mailing Address 30 Haswell Greene Rd

City Delmar State NY Zip Code 12054-9777

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

Name of Employer C.L. King and Associates Occupation Senior VP

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  
 04 / 15 / 2014

**Transaction ID : VN8JKCN3BC8**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 10 Ridge Rd

City Groton State CT Zip Code 06340-8926

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

Name of Employer IEEE Occupation Chief Marketing Officer

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  
 04 / 16 / 2014

**Transaction ID : VN8JKCN45E8**

Amount of Each Receipt this Period  
250.00

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

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

2258.00

**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 6 Cornerstone Ct

City State Zip Code  
Doylestown PA 18901-2986

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

Name of Employer Occupation  
Philadelphia Gear Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : VN8JKCNQDS2**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 9 Hidden Ln

City State Zip Code  
Doylestown PA 18901-2133

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

Name of Employer Occupation  
McCann & Geschke, P.C. Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 15 / 2014

**Transaction ID : VN8JKCN1QQ3**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 9 Hidden Ln

City State Zip Code  
Doylestown PA 18901-2133

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

Name of Employer Occupation  
McCann & Geschke, P.C. Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 24 / 2014

**Transaction ID : VN8JKCNW6S7**

Amount of Each Receipt this Period  
300.00

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

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

850.00

**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 66
	<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)  
**Kevin Strouse for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Samuel S. McKeel**

Mailing Address 1400 Waverly Rd  
Villa 56

City Gladwyne State PA Zip Code 19035-1200

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 15 / 2014

**Transaction ID : VN8JKCN39C3**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 5046 Castleman St

City Pittsburgh State PA Zip Code 15232-2107

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

Name of Employer K&L GATES Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 14 / 2014

**Transaction ID : VN8JKCNE5R6**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 170 Estates Dr

City Piedmont State CA Zip Code 94611-3314

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

Name of Employer Menike & Associates, Inc. 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  
 04 / 10 / 2014

**Transaction ID : VN8JKCMM5N8**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 1476 W Street Rd

City Warminster State PA Zip Code 18974-3112

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

Name of Employer Ametek Drexelbrook Occupation Assembly

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **577.08**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 11 / 2014**

**Transaction ID : VN8JKCMY7R5**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 1476 W Street Rd

City Warminster State PA Zip Code 18974-3112

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

Name of Employer Ametek Drexelbrook Occupation Assembly

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **582.08**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 14 / 2014**

**Transaction ID : VN8JKCNE5P0**

Amount of Each Receipt this Period  
**5.00**

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

Mailing Address 1476 W Street Rd

City Warminster State PA Zip Code 18974-3112

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

Name of Employer Ametek Drexelbrook Occupation Assembly

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **617.08**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 15 / 2014**

**Transaction ID : VN8JKCNE5S4**

Amount of Each Receipt this Period  
**35.00**

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

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

**65.00**



**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 33 OF 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 1476 W Street Rd

City Warminster State PA Zip Code 18974-3112

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

Name of Employer Ametek Drexelbrook Occupation Assembly

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **622.08**

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : VN8JKCNE5X5**

Amount of Each Receipt this Period  
 5.00

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

Mailing Address 1476 W Street Rd

City Warminster State PA Zip Code 18974-3112

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

Name of Employer Ametek Drexelbrook Occupation Assembly

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **647.08**

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : VN8JKCNW5Q0**

Amount of Each Receipt this Period  
 25.00

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

Mailing Address 1476 W Street Rd

City Warminster State PA Zip Code 18974-3112

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

Name of Employer Ametek Drexelbrook Occupation Assembly

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **682.08**

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : VN8JKCNW625**

Amount of Each Receipt this Period  
 35.00

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

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

65.00

**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 1476 W Street Rd

City Warminster State PA Zip Code 18974-3112

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

Name of Employer Ametek Drexelbrook Occupation Assembly

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **707.08**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 28 / 2014**

**Transaction ID : VN8JKCP8DG5**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 1476 W Street Rd

City Warminster State PA Zip Code 18974-3112

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

Name of Employer Ametek Drexelbrook Occupation Assembly

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **712.08**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 29 / 2014**

**Transaction ID : VN8JKCP8DT4**

Amount of Each Receipt this Period  
**5.00**

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

Mailing Address 2401 Pennsylvania Ave Apt 3C47

City Phila State PA Zip Code 19130-3017

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

Name of Employer none Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **215.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 15 / 2014**

**Transaction ID : VN8JKCNE6S7**

Amount of Each Receipt this Period  
**15.00**

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

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

**45.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 66
	<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)  
**Kevin Strouse for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Glenavie - Norton**

Mailing Address 2401 Pennsylvania Ave  
Apt 3C47

City State Zip Code  
Phila PA 19130-3017

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

Name of Employer none Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
220.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 29 / 2014

**Transaction ID : VN8JKCP8HH1**

Amount of Each Receipt this Period  
5.00

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

Mailing Address 506 S Taney St

City State Zip Code  
Philadelphia PA 19146-1045

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

Name of Employer McKinsey Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 22 / 2014

**Transaction ID : VN8JKCNW5K9**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 95 E Zion Hill Rd

City State Zip Code  
Quakertown PA 18951-4321

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
620.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 02 / 2014

**Transaction ID : VN8JKCKNE08**

Amount of Each Receipt this Period  
50.00

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

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

155.00

**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 95 E Zion Hill Rd

City Quakertown State PA Zip Code 18951-4321

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **690.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : VN8JKCP8HR6**

Amount of Each Receipt this Period  
**35.00**

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

Mailing Address 95 E Zion Hill Rd

City Quakertown State PA Zip Code 18951-4321

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **690.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : VN8JKCP8HY4**

Amount of Each Receipt this Period  
**35.00**

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

Mailing Address 3300 Darby Rd  
Apt 6303

City Haverford State PA Zip Code 19041-1074

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2635.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 29 / 2014**

**Transaction ID : VN8JKCP8HP0**

Amount of Each Receipt this Period  
**35.00**

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

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

**105.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 66
	<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)  
**Kevin Strouse for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Margaret W Ralph**

Mailing Address 430 Belrose Ln

City Radnor State PA Zip Code 19087-4419

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

Name of Employer N/A Occupation Retired Teacher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 24 / 2014

**Transaction ID : VN8JKCNN1V5**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 294 Richard Ct

City Pomona State NY Zip Code 10970-2305

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

Name of Employer Retired Occupation Social worker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 10 / 2014

**Transaction ID : VN8JKCMY6B1**

Amount of Each Receipt this Period  
 8.33

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

Mailing Address 294 Richard Ct

City Pomona State NY Zip Code 10970-2305

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

Name of Employer Retired Occupation Social worker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 13 / 2014

**Transaction ID : VN8JKCMY9E2**

Amount of Each Receipt this Period  
 1.09

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

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

509.42

**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 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 294 Richard Ct

City Pomona State NY Zip Code 10970-2305

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

Name of Employer Retired Occupation Social worker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **371.32**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 13 / 2014**

**Transaction ID : VN8JKCMY9Q1**

Amount of Each Receipt this Period  
**3.00**

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

Mailing Address 294 Richard Ct

City Pomona State NY Zip Code 10970-2305

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

Name of Employer Retired Occupation Social worker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **374.32**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 23 / 2014**

**Transaction ID : VN8JKCNW675**

Amount of Each Receipt this Period  
**3.00**

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

Mailing Address 2454 River Rd

City New Hope State PA Zip Code 18938-9519

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 21 / 2014**

**Transaction ID : VN8JKCNDAH4**

Amount of Each Receipt this Period  
**100.00**

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

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

**106.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 66
	<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)  
**Kevin Strouse for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary M. Shanklin**

Mailing Address 275 N Chapman Rd

City State Zip Code  
Doylestown PA 18901-5545

FEC ID number of contributing federal political committee.

Name of Employer none Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VN8JKCKNDT1**

Amount of Each Receipt this Period

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

Mailing Address 275 N Chapman Rd

City State Zip Code  
Doylestown PA 18901-5545

FEC ID number of contributing federal political committee.

Name of Employer none Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VN8JKCNECR2**

Amount of Each Receipt this Period

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

Mailing Address 6022 Wilshire Blvd  
Ste 201

City State Zip Code  
Los Angeles CA 90036-3616

FEC ID number of contributing federal political committee.

Name of Employer Sieroty Company Inc. Occupation Real Estate Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VN8JKCMWOP8**

Amount of Each Receipt this Period

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

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

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

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

FOR LINE NUMBER: PAGE 40 OF 66  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Kevin Strouse for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ron Jay Smolow**

Mailing Address 3 Ponds Lane

City State Zip Code  
Newtown PA 18940

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 07 / 2014

**Transaction ID : VN8JKCMY502**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 407 Gaskill St

City State Zip Code  
Philadelphia PA 19147-1512

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

Name of Employer McKinsey & Company Occupation Consultant

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 09 / 2014

**Transaction ID : VN8JKCMY585**

Amount of Each Receipt this Period  
10.00

**C.** Full Name (Last, First, Middle Initial)  
**Ben E. Stein Jr**

Mailing Address 410 Oakwynne Dr

City State Zip Code  
Wynnewood PA 19096-2352

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

Name of Employer Self-Employed Occupation Accountant & Consultant

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : VN8JKCNW920**

Amount of Each Receipt this Period  
150.00

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

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

360.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 66
	<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)  
**Kevin Strouse for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Martha Hayne Talbot**

Mailing Address 6656 Chilton Ct

City McLean	State VA	Zip Code 22101-4422
----------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Biologist
-----------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 21 / 2014

**Transaction ID : VN8JKCNDG78**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 165 Walnut Ave

City Somerset	State NJ	Zip Code 08873-1563
------------------	-------------	------------------------

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
230.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8JKCP8EZ6**

Amount of Each Receipt this Period  
35.00

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

Mailing Address 165 Walnut Ave

City Somerset	State NJ	Zip Code 08873-1563
------------------	-------------	------------------------

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
230.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8JKCP8F20**

Amount of Each Receipt this Period  
5.00

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

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

540.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 165 Walnut Ave

City Somerset State NJ Zip Code 08873-1563

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **245.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : VN8JKCP8F53**

Amount of Each Receipt this Period  
**15.00**

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

Mailing Address 113 Oakdale Loop

City Houma State LA Zip Code 70360-5932

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

Name of Employer none Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **211.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 21 / 2014**

**Transaction ID : VN8JKCNW7J5**

Amount of Each Receipt this Period  
**35.00**

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

Mailing Address 1508 Montrose St

City Philadelphia State PA Zip Code 19146-2115

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 29 / 2014**

**Transaction ID : VN8JKCP2Z34**

Amount of Each Receipt this Period  
**250.00**

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

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

**300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 1679 Lookaway Ct

City State Zip Code  
New Hope PA 18938-5490

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

Name of Employer Occupation  
Not employed Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 29 / 2014

**Transaction ID : VN8JKCP8GF2**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1679 Lookaway Ct

City State Zip Code  
New Hope PA 18938-5490

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

Name of Employer Occupation  
Not employed Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 29 / 2014

**Transaction ID : VN8JKCPB506**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 9 Dale Ct

City State Zip Code  
Cherry Hill NJ 08003-2824

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

Name of Employer Occupation  
Veeva Systems Product Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 24 / 2014

**Transaction ID : VN8JKCNN1P7**

Amount of Each Receipt this Period  
2400.00

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

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

2900.00

**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 44 OF 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 9 Dale Ct

City State Zip Code  
Cherry Hill NJ 08003-2824

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

Name of Employer Occupation  
Veeva Systems Product Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 24 / 2014

**Transaction ID : VN8JKCNN1Q5**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 2628 Summit Dr

City State Zip Code  
Hillsborough CA 94010-6038

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

Name of Employer Occupation  
Apple Computer Software Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 08 / 2014

**Transaction ID : VN8JKCKT293**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 157 N Main St  
New Hope PA18938

City State Zip Code  
New Hope PA 18938-1316

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

Name of Employer Occupation  
Not employed Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
215.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 22 / 2014

**Transaction ID : VN8JKCNW525**

Amount of Each Receipt this Period  
15.00

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

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

2865.00

**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 45 OF 66
	<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)  
**Kevin Strouse for Congress**

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

Mailing Address 205 W 76th St  
Apt 9C

City New York State NY Zip Code 10023-8224

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

Name of Employer Luminus Management Occupation Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 27 / 2014

**Transaction ID : VN8JKCNT4G5**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

28320.90

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 66
	<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)  
**Kevin Strouse for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

Mailing Address 110 Maryland Ave NE

City Washington State DC Zip Code 20002-5626

FEC ID number of contributing federal political committee. **C C00155119**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2.19**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : VN8JKCP8P30**

Amount of Each Receipt this Period  
**2.19**

\* In-Kind: Credit Card Processing Fees

**B.** Full Name (Last, First, Middle Initial)  
**INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE**

Mailing Address 900 7th St NW

City Washington State DC Zip Code 20001-3886

FEC ID number of contributing federal political committee. **C C00027342**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 14 / 2014**

**Transaction ID : VN8JKCMW107**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Plumbers Local #690 Political Action Fund**

Mailing Address 2791 Southampton Rd

City Philadelphia State PA Zip Code 19154-1211

FEC ID number of contributing federal political committee. **C C00252825**

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  
**04 / 24 / 2014**

**Transaction ID : VN8JKCNN1M1**

Amount of Each Receipt this Period  
**5000.00**

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

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

**6002.19**

**6002.19**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 66
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>Kevin Strouse</b>		Date of Receipt M M / D D / Y Y Y Y Y Y <b>04 / 23 / 2014</b>
Mailing Address <b>257 Norsam Dr</b>		<b>Transaction ID : VN8JKCNKN26</b>
City <b>Langhorne</b>	State <b>PA</b> Zip Code <b>19047-8537</b>	
FEC ID number of contributing federal political committee. <b>C H4PA08108</b>	Amount of Each Receipt this Period <b>10.00</b>	
Name of Employer <b>Teach2Serve</b>	Occupation <b>Program Director</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>97136.33</b>	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State    Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State    Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>10.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>10.00</b>

**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 66	
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 14.28
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Merchant Bank Fees	<b>Transaction ID : VN7KB9S2QN3</b>
Candidate Name	Category/Type 001	
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. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 83.98
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Merchant Bank Fees	<b>Transaction ID : VN7KB9S2QP1</b>
Candidate Name	Category/Type 001	
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. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 107.39
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Merchant Bank Fees	<b>Transaction ID : VN7KB9S3TE9</b>
Candidate Name	Category/Type 001	
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).....	205.65
<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 49 OF 66	
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 142.17 <b>Transaction ID : VN7KB9S6JJ8</b>
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Merchant Bank Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 189.37 <b>Transaction ID : VN7KB9S9J69</b>
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Merchant Bank Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Canal's End Limited Partnership</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 87		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : VN7KB9RVK77</b>
City Doylestown	State PA	
Zip Code 18901-0087	Purpose of Disbursement Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1331.54
<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 66			
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cheltenham Printing Company</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 518 Ryers Ave Bldg 2		Amount of Each Disbursement this Period 1102.40
City Cheltenham	State PA Zip Code 19012-2131	
Purpose of Disbursement Printing	Category/Type 001	<b>Transaction ID : VN7KB9RVK85</b>
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. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 3005		Amount of Each Disbursement this Period 138.01
City Southeastern	State PA Zip Code 19398-3005	
Purpose of Disbursement Utilities	Category/Type 001	<b>Transaction ID : VN7KB9RVKD4</b>
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. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address PO Box 3005		Amount of Each Disbursement this Period 138.04
City Southeastern	State PA Zip Code 19398-3005	
Purpose of Disbursement Internet	Category/Type 001	<b>Transaction ID : VN7KB9S0ZE9</b>
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).....	1378.45
<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 66	
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND</b>			Date of Disbursement M M / D D / Y Y Y Y <b>04 / 30 / 2014</b>
Mailing Address <b>110 Maryland Ave NE</b>			Amount of Each Disbursement this Period <b>2.19</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20002-5626</b>	Transaction ID : <b>VN8JKCP8P30I</b>
Purpose of Disbursement <b>Credit Card Processing Fees</b>		Category/ Type	
Candidate Name <b>COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND</b>		Disbursement For: <b>2014</b>	* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) <b>B. First Data Merchant Services</b>			Date of Disbursement M M / D D / Y Y Y Y <b>04 / 03 / 2014</b>
Mailing Address <b>5565 Glenridge Connector NE #2000</b>			Amount of Each Disbursement this Period <b>197.42</b>
City <b>Atlanta</b>	State <b>GA</b>	Zip Code <b>30342</b>	Transaction ID : <b>VN7KB9S2QF6</b>
Purpose of Disbursement <b>Merchant Bank Fees</b>		Category/ Type <b>001</b>	
Candidate Name		Disbursement For: <b>2014</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) <b>c. First Data Merchant Services</b>			Date of Disbursement M M / D D / Y Y Y Y <b>04 / 03 / 2014</b>
Mailing Address <b>5565 Glenridge Connector NE #2000</b>			Amount of Each Disbursement this Period <b>237.96</b>
City <b>Atlanta</b>	State <b>GA</b>	Zip Code <b>30342</b>	Transaction ID : <b>VN7KB9S2QG4</b>
Purpose of Disbursement <b>Merchant Bank Fees</b>		Category/ Type <b>001</b>	
Candidate Name		Disbursement For: <b>2014</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>437.57</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 52 OF 66	
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. First Data Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 5565 Glenridge Connector NE #2000		Amount of Each Disbursement this Period 41.65
City Atlanta State GA Zip Code 30342	Purpose of Disbursement Merchant Bank Fees 001 Category/Type	
Candidate Name		Transaction ID : VN7KB9S2QJ9
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. GMMB Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 3050 K St NW		Amount of Each Disbursement this Period 164195.06
City Washington State DC Zip Code 20007-5108	Purpose of Disbursement Broadcast Media 004 Category/Type	
Candidate Name		Transaction ID : VN7KB9S3SD0
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:	

Wire Transfer-invoice 1062872

Full Name (Last, First, Middle Initial) <b>C. Brendan McPhillips</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2437 Christian St		Amount of Each Disbursement this Period 147.00
City Philadelphia State PA Zip Code 19146-2405	Purpose of Disbursement Reimbursement-See Details 001 Category/Type	
Candidate Name		Transaction ID : VN7KB9RVJJ1
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).....	164383.71
<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 66	
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2329 Street Rd		Amount of Each Disbursement this Period 147.00
City Bensalem	State PA Zip Code 19020-2806	
Purpose of Disbursement Postage	Category/Type 001	Transaction ID : VN7KB9RVJP3
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)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Brendan McPhillips</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2437 Christian St		Amount of Each Disbursement this Period 413.67
City Philadelphia	State PA Zip Code 19146-2405	
Purpose of Disbursement Reimbursement-See Details	Category/Type	Transaction ID : VN7KB9RVJY6
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)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2329 Street Rd		Amount of Each Disbursement this Period 217.36
City Bensalem	State PA Zip Code 19020-2806	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : VN7KB9RVJX8
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)	[MEMO ITEM] *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	413.67
<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 66			
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2329 Street Rd		Amount of Each Disbursement this Period 104.40
City Bensalem	State PA	
Zip Code 19020-2806	Purpose of Disbursement Office Supplies	Transaction ID : VN7KB9RVK02
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2329 Street Rd		Amount of Each Disbursement this Period 91.91
City Bensalem	State PA	
Zip Code 19020-2806	Purpose of Disbursement Office Supplies	Transaction ID : VN7KB9RVK28
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Brendan McPhillips</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2437 Christian St		Amount of Each Disbursement this Period 54.00
City Philadelphia	State PA	
Zip Code 19146-2405	Purpose of Disbursement Travel Reimbursement	Transaction ID : VN7KB9RVK69
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	54.00
<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 66			
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brendan McPhillips</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2437 Christian St		Amount of Each Disbursement this Period 151.25 <b>Transaction ID : VN7KB9RVN05</b>
City Philadelphia	State PA Zip Code 19146-2405	
Purpose of Disbursement Reimbursement-See Details	001	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. New Media Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 118 E Main St Ste A		Amount of Each Disbursement this Period 207.00 <b>Transaction ID : VN7KB9RVKE2</b>
City Carrboro	State NC Zip Code 27510-2300	
Purpose of Disbursement Internet Services	001	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. NGP VAN Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 2100.00 <b>Transaction ID : VN7KB9RVKB9</b>
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement Internet Services	001	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).....	2458.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 66			
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hilary Parker</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 550 Bethan Rd		Amount of Each Disbursement this Period 177.00
City Elkins Park	State PA	
Zip Code 19027-1931	Purpose of Disbursement Travel Reimbursement	Transaction ID : VN7KB9RVM03
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hilary Parker</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 550 Bethan Rd		Amount of Each Disbursement this Period 150.00
City Elkins Park	State PA	
Zip Code 19027-1931	Purpose of Disbursement Travel Expense	Transaction ID : VN7KB9RVM36
Candidate Name	Category/ Type 001	
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)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hilary Parker</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 550 Bethan Rd		Amount of Each Disbursement this Period 431.00
City Elkins Park	State PA	
Zip Code 19027-1931	Purpose of Disbursement Reimbursemet-See Details	Transaction ID : VN7KB9RVMB9
Candidate Name	Category/ Type 001	
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).....	608.00
<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 66	
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. Black Sheep Irish Pub</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 247 S 17th St		Amount of Each Disbursement this Period 431.00
City Philadelphia	State PA Zip Code 19103-6314	
Purpose of Disbursement Event Catering	Category/Type 007	Transaction ID : VN7KB9RVM78
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)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hilary Parker</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 550 Bethan Rd		Amount of Each Disbursement this Period 38.13
City Elkins Park	State PA Zip Code 19027-1931	
Purpose of Disbursement Reimbursemet-See Details	Category/Type 001	Transaction ID : VN7KB9S0ZH3
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. Bensalem Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 1800 Byberry Rd		Amount of Each Disbursement this Period 16.95
City Bensalem	State PA Zip Code 19020-4750	
Purpose of Disbursement Shipping	Category/Type 001	Transaction ID : VN7KB9S0ZP2
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)	[MEMO ITEM] *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	38.13
<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 58 OF 66	
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2014
Mailing Address 2329 Street Rd		Amount of Each Disbursement this Period 21.18
City Bensalem	State PA	
Zip Code 19020-2806	Purpose of Disbursement Office Supplies	Transaction ID : VN7KB9S0ZM6
Candidate Name	Category/Type 001	
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)	[MEMO ITEM]
State: District:		*

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2014
Mailing Address 820 Adams Ave Ste 210		Amount of Each Disbursement this Period 8229.86
City Norristown	State PA	
Zip Code 19403-2328	Purpose of Disbursement Payroll Expense-See Details	Transaction ID : VN7KB9RX3X2
Candidate Name	Category/Type 001	
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)	[MEMO ITEM]
State: District:		*

Full Name (Last, First, Middle Initial) <b>c. Christopher Furgiuele</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2014
Mailing Address 205 Calais Cir		Amount of Each Disbursement this Period 920.73
City Doylestown	State PA	
Zip Code 18902-9488	Purpose of Disbursement Payroll Item	Transaction ID : VN7KB9RX3Z8
Candidate Name	Category/Type 001	
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)	[MEMO ITEM]
State: District:		*

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8229.86
<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 66			
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ryan Long</b>			Date of Disbursement MM / DD / YYYY 04 / 04 / 2014
Mailing Address 5300 Neshaminy Blvd Apt 1454			Amount of Each Disbursement this Period 932.28
City Bensalem	State PA	Zip Code 19020-1225	
Purpose of Disbursement Payroll Item	Candidate Name		Transaction ID : VN7KB9RXGK1
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:	Category/Type 001		[MEMO ITEM] *

Full Name (Last, First, Middle Initial) <b>B. Brendan McPhillips</b>			Date of Disbursement MM / DD / YYYY 04 / 04 / 2014
Mailing Address 2437 Christian St			Amount of Each Disbursement this Period 2242.65
City Philadelphia	State PA	Zip Code 19146-2405	
Purpose of Disbursement Payroll Item	Candidate Name		Transaction ID : VN7KB9RXGG7
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:	Category/Type 001		[MEMO ITEM] *

Full Name (Last, First, Middle Initial) <b>c. Hilary Parker</b>			Date of Disbursement MM / DD / YYYY 04 / 04 / 2014
Mailing Address 550 Bethan Rd			Amount of Each Disbursement this Period 1258.64
City Elkins Park	State PA	Zip Code 19027-1931	
Purpose of Disbursement Payroll Item	Candidate Name		Transaction ID : VN7KB9RX3Y0
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:	Category/Type 001		[MEMO ITEM] *

<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 66	
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 820 Adams Ave Ste 210		Amount of Each Disbursement this Period 72.00
City Norristown	State PA Zip Code 19403-2328	
Purpose of Disbursement Payroll Insurance	Category/Type 001	Transaction ID : VN7KB9RXGN6  [MEMO ITEM] *
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. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 820 Adams Ave Ste 210		Amount of Each Disbursement this Period 2824.55
City Norristown	State PA Zip Code 19403-2328	
Purpose of Disbursement Payroll Taxes	Category/Type 001	Transaction ID : VN7KB9RXHS1  [MEMO ITEM] *
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. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 820 Adams Ave Ste 210		Amount of Each Disbursement this Period 72.00
City Norristown	State PA Zip Code 19403-2328	
Purpose of Disbursement Payroll Fee	Category/Type 001	Transaction ID : VN7KB9S2QE8
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).....	72.00
<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 61 OF 66	
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 820 Adams Ave Ste 210		Amount of Each Disbursement this Period 7812.02
City Norristown	State PA Zip Code 19403-2328	
Purpose of Disbursement Payroll Expenses-See Details	Category/Type 001	<b>Transaction ID : VN7KB9S33T7</b>
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. Christopher Furgiuele</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 205 Calais Cir		Amount of Each Disbursement this Period 920.74
City Doylestown	State PA Zip Code 18902-9488	
Purpose of Disbursement Payroll Item	Category/Type 001	<b>Transaction ID : VN7KB9S33V5</b>
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:		

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial) <b>c. Ryan Long</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 5300 Neshaminy Blvd Apt 1454		Amount of Each Disbursement this Period 932.28
City Bensalem	State PA Zip Code 19020-1225	
Purpose of Disbursement Payroll Item	Category/Type 001	<b>Transaction ID : VN7KB9S33W3</b>
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:		

**[MEMO ITEM]**  
\*

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7812.02
<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 66			
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brendan McPhillips</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2014
Mailing Address 2437 Christian St		Amount of Each Disbursement this Period 2242.66
City Philadelphia	State PA	
Zip Code 19146-2405	Purpose of Disbursement Payroll Item	Transaction ID : VN7KB9S33Z7
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hilary Parker</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2014
Mailing Address 550 Bethan Rd		Amount of Each Disbursement this Period 1258.62
City Elkins Park	State PA	
Zip Code 19027-1931	Purpose of Disbursement Payroll Item	Transaction ID : VN7KB9S33X1
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2014
Mailing Address 820 Adams Ave Ste 210		Amount of Each Disbursement this Period 36.78
City Norristown	State PA	
Zip Code 19403-2328	Purpose of Disbursement Payroll Insurance	Transaction ID : VN7KB9S3405
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
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 63 OF 66			
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 820 Adams Ave Ste 210		Amount of Each Disbursement this Period 2420.94
City Norristown	State PA Zip Code 19403-2328	
Purpose of Disbursement Payroll Taxes	Category/Type 001	Transaction ID : VN7KB9S3412
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)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 820 Adams Ave Ste 210		Amount of Each Disbursement this Period 88.15
City Norristown	State PA Zip Code 19403-2328	
Purpose of Disbursement Payroll Fees	Category/Type 001	Transaction ID : VN7KB9S9J35
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. PECO</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 37629		Amount of Each Disbursement this Period 118.80
City Philadelphia	State PA Zip Code 19101-0629	
Purpose of Disbursement Utilities	Category/Type 001	Transaction ID : VN7KB9RVK93
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).....	206.95
<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 66			
	<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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. PECO</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address PO Box 37629		Amount of Each Disbursement this Period 131.27
City Philadelphia	State PA	
Zip Code 19101-0629	Purpose of Disbursement Utilities	001 Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) <b>B. The Pivot Group</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 1720 I St NW Ste 550		Amount of Each Disbursement this Period 2200.00
City Washington	State DC	
Zip Code 20006-3741	Purpose of Disbursement Printing	006 Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) <b>c. Henry Webster-Mellon</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 299 Maple Ave		Amount of Each Disbursement this Period 1500.00
City Doylestown	State PA	
Zip Code 18901-4465	Purpose of Disbursement Salary	001 Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3831.27
<b>TOTAL</b> This Period (last page this line number only).....	191461.07



**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 66	
	<input type="checkbox"/> 17 <input checked="" 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)  
**Kevin Strouse for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert D Eckel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 1775 Meadow Rd		Amount of Each Disbursement this Period 25.00
City Southampton	State PA	
Zip Code 18966-4559	Purpose of Disbursement Contribution Refund	<b>Transaction ID : VN7KB9S8FX5</b>
Candidate Name	Category/ Type 010	
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. Jeanie Kilgour</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 6727 Woods Creek Dr		Amount of Each Disbursement this Period 350.00
City Charlevoix	State MI	
Zip Code 49720-9395	Purpose of Disbursement Contribution Refund	<b>Transaction ID : VN7KB9S40X9</b>
Candidate Name	Category/ Type 010	
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.</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	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).....	375.00
<b>TOTAL</b> This Period (last page this line number only).....	375.00

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VN8JKCMSJ67L

Kevin Strouse for Congress

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

[PERSONAL FUNDS]

Election: 2014

Kevin Strouse

Primary

General

Other (specify) ▼

Mailing Address

257 Norsam Dr

City

State

ZIP Code

Langhorne

PA

19047-8537

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

50000.00

0.00

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M 03 /

D 28 /

Y 2014 Y

M M /

D D /

Y none Y Y

none % (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

50000.00

**TOTALS** This Period (last page in this line only)..... ▶

50000.00

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