

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

RYAN COSTELLO FOR CONGRESS

ADDRESS (number and street)

PO BOX 3154

Check if different  
than previously  
reported. (ACC)

WEST CHESTER

PA

19381

2. FEC IDENTIFICATION NUMBER ▼

C

C00554899

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

PA

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
05 / 01 / 2014

through

M M / D D / Y Y Y Y  
06 / 30 / 2014

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

Type or Print Name of Treasurer SCOT R. WITHERS

Signature of Treasurer

SCOT R. WITHERS

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
07 / 15 / 2014

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

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

**RYAN COSTELLO FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

	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))....	600174.89	1012594.89
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	600174.89	1012594.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	103831.52	203607.98
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	103831.52	203607.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	808986.91	
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) .....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

**RYAN COSTELLO FOR CONGRESS**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
05 / 01 / 2014

To:

M M / D D / Y Y Y Y  
06 / 30 / 2014

**I. RECEIPTS**

**COLUMN A**  
**Total This Period**

**COLUMN B**  
**Election Cycle-to-Date**

**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

272000.00

527360.50

**(ii) Unitemized.....**

4185.00

14894.50

**(iii) TOTAL of contributions from individuals ▶**

276185.00

542255.00

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

323989.89

470339.89

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

600174.89

1012594.89

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

600174.89

1012594.89

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	103831.52	203607.98
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	103831.52	203607.98

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	312643.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	600174.89
25. SUBTOTAL (add Line 23 and Line 24).....	912818.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	103831.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	808986.91

**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 158

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DEBORAH ABEL****A.**

Mailing Address 111 PHOENIXVILLE PIKE

P.O.BOX 2015

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ABEL BROTHERS TOWING

Occupation

BUSINESS MANAGER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		27		2014

Transaction ID : SA11AI.5870

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**JAMES AVERILL****B.**

Mailing Address 245 ASHWOOD

City

VILLANOVA

State

PA

Zip Code

19085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		18		2014

Transaction ID : SA11AI.5872

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**DAVID M BANET****C.**

Mailing Address 652 BYERS ROAD

City

CHESTER SPRINGS

State

PA

Zip Code

19425

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DAVID M BANET &amp; ASSOCIATES

Occupation

INSURANCE BROKER

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : SA11AI.5873

Amount of Each Receipt this Period

2600.00

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

4600.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RICHARD K. BARNHART****A.**

Mailing Address 40 EVANS LANE

City

HAVERFORD

State

PA

Zip Code

19041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PENNROSE PROPERTIES, LLC

Occupation

CEO

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.6083

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**AMY L. BARTO****B.**

Mailing Address 133 CARSON STREET

City

PHOENIXVILLE

State

PA

Zip Code

19460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BARTO POOL &amp; SPA

Occupation

OWNER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		18		2014

Transaction ID : SA11AI.6028

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**ELAINE K. BARTO****C.**

Mailing Address 507 REEVES DRIVE

City

PHOENIXVILLE

State

PA

Zip Code

19460

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

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		18		2014

Transaction ID : SA11AI.6088

Amount of Each Receipt this Period

350.00

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

1150.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**RYAN COSTELLO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>LINDA SUE BAUER</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 12 MOURAR DRIVE		<b>Transaction ID : SA11AI.6087</b>	
City SPRING CITY	State PA	Zip Code 19475	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 375.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. JOHN M BECKER</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2014	
Mailing Address 800 NORTH 3RD STREET SUITE 503		<b>Transaction ID : SA11AI.5875</b>	
City HARRISBURG	State PA	Zip Code 17102	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer ACPA PENN CHAPTER	Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Ms. LISA A. BELL</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014	
Mailing Address 729 HARRISON ROAD		<b>Transaction ID : SA11AI.5877</b>	
City VILLANOVA	State PA	Zip Code 19085	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		1500.00	
<b>TOTAL</b> This Period (last page this line number only).....			

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BARRY J BENTLEY**

A.

Mailing Address 281 GROVE ROAD

City

ELVERSON

State

PA

Zip Code

19520

FEC ID number of contributing federal political committee.

C

Name of Employer  
BENTLEY SYSTEMSOccupation  
DIRECTOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 15 / 2014

Transaction ID : SA11AI.5880

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**KEITH BENTLEY**

B.

Mailing Address 100 MORNINGSIDE RD.

City

ELVERSON

State

PA

Zip Code

19520

FEC ID number of contributing federal political committee.

C

Name of Employer  
BENTLEY SYSTEMS, INC.Occupation  
EXECUTIVE

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 27 / 2014

Transaction ID : SA11AI.6030

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**Mr. SCOTT BENTLEY**

C.

Mailing Address 2039 ST. PETERS ROAD

City

POTTSTOWN

State

PA

Zip Code

19465

FEC ID number of contributing federal political committee.

C

Name of Employer  
VIDEORAYOccupation  
OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 16 / 2014

Transaction ID : SA11AI.5879

Amount of Each Receipt this Period

1000.00

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

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

5000.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ROBERT BOLLAND****A.**

Mailing Address 620 THORNCROFT DRIVE

City

WEST CHESTER

State

PA

Zip Code

19380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAILLIE LLP

Occupation

PARTNER

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		15		2014

Transaction ID : SA11AI.6249

Amount of Each Receipt this Period

200.00

INKIND: PAYROLL SERVICES/TAXES

Full Name (Last, First, Middle Initial)

**ROBERT BOLLAND****B.**

Mailing Address 620 THORNCROFT DRIVE

City

WEST CHESTER

State

PA

Zip Code

19380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAILLIE LLP

Occupation

PARTNER

Receipt For: 2014

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : SA11AI.6251

Amount of Each Receipt this Period

200.00

IN-KIND: PAYROLL SERVICES/TAXES

Full Name (Last, First, Middle Initial)

**Mr. STEVEN B BOLT****C.**

Mailing Address 1128 DUNSINANE HILL

City

CHESTER SPRINGS

State

PA

Zip Code

19425

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ORTH-RODGERS &amp; ASSOCIATES, INC

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		15		2014

Transaction ID : SA11AI.5882

Amount of Each Receipt this Period

250.00

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

650.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**RYAN COSTELLO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>PATRICIA M BRADEN</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2014	
Mailing Address 376 LAURELWOOD DRIVE		<b>Transaction ID : SA11AI.5863</b>	
City LEBANON	State PA	Zip Code 17042	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Ms. SUSAN L BRANDT</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014	
Mailing Address 187 WINDGATE DRIVE		<b>Transaction ID : SA11AI.5884</b>	
City CHESTER SPRINGS	State PA	Zip Code 19425	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer BENTLEY SYSTEMS	Occupation VP NORTH AMERICA REGIONAL SALES		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mr. DAVID R BREIDINGER</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 06 / 2014	
Mailing Address 196 HILLTOP DRIVE		<b>Transaction ID : SA11AI.5886</b>	
City CHURCHVILLE	State PA	Zip Code 18966	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer COMCAST CORP.	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		1700.00	
<b>TOTAL</b> This Period (last page this line number only).....			

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

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

FOR LINE NUMBER: PAGE 11 OF 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. JASON BRENNAN**

Mailing Address 420 NORTH MATLACK STREET

City

WEST CHESTER

State

PA

Zip Code

19380

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WESTTOWN SCHOOL

Occupation  
AQUATIC DIRECTOR

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 10 / 2014

Transaction ID : SA11AI.6114

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**RONALD F. BRIEN**

Mailing Address 808 WESTFIELD AVENUE

City

SPRING CITY

State

PA

Zip Code

19475

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ENTREPRENEUR

Occupation  
ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 21 / 2014

Transaction ID : SA11AI.5845

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Ms. GLENDA K. BRION**

Mailing Address 922 SCONNELL TOWN ROAD

City

WEST CHESTER

State

PA

Zip Code

19382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BUCKLEY BRION

Occupation  
PARTNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2300.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 27 / 2014

Transaction ID : SA11AI.5888

Amount of Each Receipt this Period

2300.00

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

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

4900.00

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

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

FOR LINE NUMBER:

PAGE 12 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOSEPH E. BRION**

A.

Mailing Address 922 SCONNELLTOWN ROAD

City

WEST CHESTER

State

PA

Zip Code

19382

FEC ID number of contributing federal political committee.

C

Name of Employer

BUCKLEY BRION

Occupation

PARTNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4600.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 27 / 2014

Transaction ID : SA11AI.6032

Amount of Each Receipt this Period

2300.00

Full Name (Last, First, Middle Initial)

**DEAN BROWNING**

B.

Mailing Address 987 POSTAL ROAD

City

ALLENTOWN

State

PA

Zip Code

18109

FEC ID number of contributing federal political committee.

C

Name of Employer

NEW WORLD AVIATION

Occupation

CFO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 23 / 2014

Transaction ID : SA11AI.6076

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**BENJAMIN BRUTON**

C.

Mailing Address 28 SOUTH TERRALLEE LANE

City

DOWNINGTOWN

State

PA

Zip Code

19335

FEC ID number of contributing federal political committee.

C

Name of Employer

BRUNTON FINANCIAL

Occupation

FINANCIAL ADVISOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 12 / 2014

Transaction ID : SA11AI.5889

Amount of Each Receipt this Period

1000.00

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

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

4300.00

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

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

FOR LINE NUMBER: PAGE 13 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CARL V. BUCK**

Mailing Address 173 BRIARWOOD ROAD

City

MT. LAUREL

State

NJ

Zip Code

08054

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

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Transaction ID : SA11AI.5766

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Mr. EDWARD F BUCKLEY**

Mailing Address 1801 CLOVERLAWN COURT

City

MCLEAN

State

VA

Zip Code

22101

FEC ID number of contributing federal political committee.

C

Name of Employer

SHIRE

Occupation

PUBLIC AFFAIRS

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		12		2014

Transaction ID : SA11AI.6205

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JEFF BUCKMAN**

Mailing Address 105 AIRPORT ROAD

City

POTTSTOWN

State

PA

Zip Code

19464

FEC ID number of contributing federal political committee.

C

Name of Employer

BUCKMAN'S INC

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		14		2014

Transaction ID : SA11AI.5890

Amount of Each Receipt this Period

1000.00

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

1750.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. JOHN Ellis BUSH**

Mailing Address 1200 ANASTASIA AVENUE

City

CORAL GABLES

State

FL

Zip Code

33134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JEB BUSH AND ASSOCIATES

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5677

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Ms. ANDREA Fanfera CABAN**

Mailing Address 2717 SWAMP PIKE

City

POTTSTOWN

State

PA

Zip Code

19464

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CERTAPRO PAINTERS MAIN LINE

Occupation

OWNER

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5892

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Mr. DONALD R CALDWELL**

Mailing Address 531 NORTH ROSE LN

City

HAVERFORD

State

PA

Zip Code

19041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CROSS ATLANTIC CAPITAL

Occupation

INVESTOR

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5894

Amount of Each Receipt this Period

1000.00

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

2500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FRANCIS J. CATANIA****A.**

Mailing Address 317 NORTH OAK AVENUE

City

CLIFTON HEIGHTS

State

PA

Zip Code

19018

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CATANIA &amp; PARKER LLP

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.6033

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**FRANCIS J. CATANIA****B.**

Mailing Address 317 NORTH OAK AVENUE

City

CLIFTON HEIGHTS

State

PA

Zip Code

19018

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CATANIA &amp; PARKER LLP

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.6034

Amount of Each Receipt this Period

1300.00

Full Name (Last, First, Middle Initial)

**Mr. JAMES H. CAVANAUGH****C.**

Mailing Address 554 DORSET ROAD

City

DEVON

State

PA

Zip Code

19333

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HEALTH CARE VENTURE LLC

Occupation

MANAGING PARTNER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.5896

Amount of Each Receipt this Period

2600.00

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

4400.00

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

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

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

FOR LINE NUMBER:

PAGE 16 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. CHARLES E CHASE**

A.

Mailing Address 1252 THOMAS ROAD

City

WAYNE

State

PA

Zip Code

19087

FEC ID number of contributing federal political committee.

C

Name of Employer

FIRSTSERVICE BRANDS

Occupation

PRESIDENT/CEO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2400.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

Transaction ID : SA11AI.5898

Amount of Each Receipt this Period

2400.00

Full Name (Last, First, Middle Initial)

**Mr. CHARLES E CHASE**

B.

Mailing Address 1252 THOMAS ROAD

City

WAYNE

State

PA

Zip Code

19087

FEC ID number of contributing federal political committee.

C

Name of Employer

FIRSTSERVICE BRANDS

Occupation

PRESIDENT/CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

Transaction ID : SA11AI.5899

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**CHIMICLES & TIKELLIS LLP**

C.

Mailing Address 1 HAVERFORD CENTRE

City

HAVERFORD

State

PA

Zip Code

19041

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 16 / 2014

Transaction ID : SA11AI.6115

Amount of Each Receipt this Period

2600.00

PARTNERSHIP INFORMATION REQUESTED

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

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

7600.00



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

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

FOR LINE NUMBER:

PAGE 17 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. DANIEL CIRUCCI**

Mailing Address 242 GORDEN PARK BLVD

City

CHERRY HILL

State

NJ

Zip Code

08002

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

250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

Transaction ID : SA11AI.5768

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**BRIAN W CLEMENTS**

Mailing Address 300 NORTH ELM STREET

City

WERNERSVILLE

State

PA

Zip Code

19565

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

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 12 / 2014

Transaction ID : SA11AI.5900

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**ALLAN M. COHEN**

Mailing Address P.O.BOX 561

City

VALLEY FORGE

State

PA

Zip Code

19481

FEC ID number of contributing federal political committee.

C

Name of Employer

ENTREPRENEUR

Occupation

DOCTOR

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 19 / 2014

Transaction ID : SA11AI.5840

Amount of Each Receipt this Period

100.00

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

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

2950.00

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

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

FOR LINE NUMBER:

PAGE 18 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WILLIAM H COMBS**

A.

Mailing Address 6 HIGH ROAD

City

WYOMISSING

State

PA

Zip Code

19610

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

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2014

Transaction ID : SA11AI.5901

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**THOMAS J. COOKE**

B.

Mailing Address 1780 CREEK ROAD

PO BOX 137

City

GLENMOORE

State

PA

Zip Code

19343

FEC ID number of contributing federal political committee.

C

Name of Employer

EUCLID TWP

Occupation

BUILDING AND ZONING OFFICAL

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11AI.6041

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Mr. GEORGE P. CORDES**

C.

Mailing Address 230 N. MONROE STREET

City

MEDIA

State

PA

Zip Code

19063

FEC ID number of contributing federal political committee.

C

Name of Employer

MICHAEL F. X. GILLIN &amp; ASSOCIATES

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  
05 / 29 / 2014

Transaction ID : SA11AI.5903

Amount of Each Receipt this Period

500.00

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

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

3600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ANTHONY V. COSTELLO****A.**

Mailing Address 104 SHEEDER RD.

City

PHOENIXVILLE

State

PA

Zip Code

19460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

**Transaction ID : SA11AI.5904**

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**SHARON I. COSTELLO****B.**

Mailing Address 104 SHEEDER RD.

City

PHOENIXVILLE

State

PA

Zip Code

19460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

**Transaction ID : SA11AI.5905**

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Mr. MATTHEW G CUMMINGS****C.**

Mailing Address 417 WAVERLY ROAD

City

WYNCOTE

State

PA

Zip Code

19095

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DMJM HARRIS

Occupation

VICE PRESIDENT

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

**Transaction ID : SA11AI.5907**

Amount of Each Receipt this Period

500.00

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

5700.00

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

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

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

FOR LINE NUMBER:

PAGE 20 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. CONOR M. CUMMINS**

Mailing Address 357 HIDDEN FARM DRIVE

City

EXTON

State

PA

Zip Code

19341

FEC ID number of contributing federal political committee.

C

Name of Employer  
MOLLY MAGUIRESOccupation  
OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1300.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 20 / 2014

Transaction ID : SA11AI.5909

Amount of Each Receipt this Period

1300.00

Full Name (Last, First, Middle Initial)

**Mr. JEFFREY D'AMBROSIO**

Mailing Address 1272 LISLE LANE

City

CHESTER SPRINGS

State

PA

Zip Code

19425

FEC ID number of contributing federal political committee.

C

Name of Employer  
T&M ASSOCIATESOccupation  
ENGINEER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 26 / 2014

Transaction ID : SA11AI.5911

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Mr. GARY C. DAHMS**

Mailing Address P.O.BOX 501

City

ALLENWOOD

State

NJ

Zip Code

08720

FEC ID number of contributing federal political committee.

C

Name of Employer  
D'AMBROSIO AUTO GROUPOccupation  
OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 01 / 2014

Transaction ID : SA11AI.5770

Amount of Each Receipt this Period

300.00

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

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

4200.00

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

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

FOR LINE NUMBER:

PAGE 21 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MARK H. DAMBLY**

Mailing Address 354 DARLINGTON ROAD

City

MEDIA

State

PA

Zip Code

19063

FEC ID number of contributing federal political committee.

C

Name of Employer

PENNROSE PROPERTIES, LLC

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 20 / 2014

Transaction ID : SA11AI.6082

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**DB RENTAL**

Mailing Address 1800 PENNBROOK PARKWAY  
STE 200, P.O.BOX 107

City

LANSDALE

State

PA

Zip Code

19446

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 01 / 2014

Transaction ID : SA11AI.6117

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**THEODORE J. DELGAIZO**

Mailing Address 318 S. CALDWELL CIRCLE

City

DOWNTOWN

State

PA

Zip Code

19335

FEC ID number of contributing federal political committee.

C

Name of Employer

MAIN LINE ENGINEERING

Occupation

OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 17 / 2014

Transaction ID : SA11AI.5913

Amount of Each Receipt this Period

400.00

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

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

1200.00

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

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

FOR LINE NUMBER:

PAGE 22 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. PETER DEPAUL Sr.**

Mailing Address 7001 DORSAM WAY

City

AMBER

State

PA

Zip Code

19002

FEC ID number of contributing federal political committee.

C

Name of Employer

DEPAUL GROUP

Occupation

OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11AI.6038

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**Mr. JEFF DETWILER**

Mailing Address 340 ESHELMAN ROAD

City

LANCASTER

State

PA

Zip Code

17601

FEC ID number of contributing federal political committee.

C

Name of Employer

NEW ENTERPRISES SIGNS

Occupation

PRESIDENT/COO EAST DIVISION

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 15 / 2014

Transaction ID : SA11AI.5917

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Mr. PAUL I DETWILER 3**

Mailing Address 5029 PENNKNOLE HTS.

City

EVERETT

State

PA

Zip Code

15537

FEC ID number of contributing federal political committee.

C

Name of Employer

NEW ENTERPRISE STONE & LIME

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 15 / 2014

Transaction ID : SA11AI.5915

Amount of Each Receipt this Period

500.00

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

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

3000.00

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

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

FOR LINE NUMBER:

PAGE 23 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. JAMES M DINNOCENZO**

Mailing Address 507 ORCHARD DRIVE

City

LEMOYNE

State

PA

Zip Code

17043

FEC ID number of contributing federal political committee.

C

Name of Employer

COMCAST

Occupation

VP

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2014

Transaction ID : SA11AI.5919

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Mr. RUSSELL S. DUNLEVY III**

Mailing Address 5068 RYAN ROAD

City

PIPERSVILLE

State

PA

Zip Code

18947

FEC ID number of contributing federal political committee.

C

Name of Employer

GILMORE ASSOCIATES

Occupation

EXECUTIVE VICE PRESIDENT

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2014

Transaction ID : SA11AI.6052

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mr. EDWARD EASTON**

Mailing Address 10165 NW 19TH STREET

City

MIAMI

State

FL

Zip Code

33172

FEC ID number of contributing federal political committee.

C

Name of Employer

THE EASTON GROUP

Occupation

CEO

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5679

Amount of Each Receipt this Period

2400.00

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

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

3900.00

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

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

FOR LINE NUMBER:

PAGE 24 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. EDWARD EASTON**

Mailing Address 10165 NW 19TH STREET

City

MIAMI

State

FL

Zip Code

33172

FEC ID number of contributing federal political committee.

C

Name of Employer

THE EASTON GROUP

Occupation

CEO

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5680

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**ROBERT E. FENZA**

Mailing Address 205 NORTHBROOK RD.

City

WEST CHESTER

State

PA

Zip Code

19382

FEC ID number of contributing federal political committee.

C

Name of Employer

LIBERTY PROPERTY TRUST

Occupation

EVP &amp; COO

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2014

Transaction ID : SA11AI.6066

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ROBERT E. FENZA**

Mailing Address 205 NORTHBROOK RD.

City

WEST CHESTER

State

PA

Zip Code

19382

FEC ID number of contributing federal political committee.

C

Name of Employer

LIBERTY PROPERTY TRUST

Occupation

EVP &amp; COO

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

Transaction ID : SA11AI.6067

Amount of Each Receipt this Period

1000.00

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

4600.00

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



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

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

FOR LINE NUMBER:

PAGE 25 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. LANE FISHER**

Mailing Address 311 VIOLET LANE

City

WYNNEWOOD

State

PA

Zip Code

19096

FEC ID number of contributing federal political committee.

C

Name of Employer

FIRSHER ZUCKER LLC

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 20 / 2014

Transaction ID : SA11AI.5921

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**Mr. RICHARD J. FOX**

Mailing Address 39 FAIRVIEW ROAD

City

NARBERTH

State

PA

Zip Code

19072

FEC ID number of contributing federal political committee.

C

Name of Employer

FOX COMPANIES

Occupation

BUILDER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11AI.5923

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**FOX ROTHSCHILD LLP**

Mailing Address 2000 MARKET STREET  
20TH FLOOR

City

PHILADELPHIA

State

PA

Zip Code

19103

FEC ID number of contributing federal political committee.

C

Name of Employer

LLP

Occupation

LLP

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 25 / 2014

Transaction ID : SA11AI.6118

Amount of Each Receipt this Period

1000.00

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 26 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**STEVEN L FREIDMAN**

Mailing Address 30 S. 17TH STREET

City

PHILADELPHIA

State

PA

Zip Code

19103

FEC ID number of contributing federal political committee.

C

Name of Employer

DUANE MORRIS LLP

Occupation

LAWYER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2014

Transaction ID : SA11AI.6040

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**EDWARD J. FURMAN**

Mailing Address 120 BELLE CIR

City

BLUE BELL

State

PA

Zip Code

19422

FEC ID number of contributing federal political committee.

C

Name of Employer

MAILLIE LLP

Occupation

CPA

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2014

Transaction ID : SA11AI.6068

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**Mr. MICHAEL GAMBONE**

Mailing Address P.O.BOX 950

City

WORCHESTER

State

PA

Zip Code

19490

FEC ID number of contributing federal political committee.

C

Name of Employer

GAMBONE MANAGEMENT COMPANY

Occupation

VP

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2014

Transaction ID : SA11AI.6048

Amount of Each Receipt this Period

500.00

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

2800.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. MICHAEL F.X. GILLIN**

Mailing Address 230 N. MONROE STREET

City

MEDIA

State

PA

Zip Code

19063

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MICHAEL F. X. GILLIN &amp; ASSOCIATES

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.5925

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**PETER F GIORGI**

Mailing Address 1635 MUSEUM RD

City

WYOMISSING

State

PA

Zip Code

19610

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GIORGIO FOODS, INC

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		15		2014

Transaction ID : SA11AI.5926

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Mr. GARY GOLDBLOOM**

Mailing Address 2627 SOUTH BAYSHORE DRIVE

City

MIAMI

State

FL

Zip Code

33172

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GARY GOLDBLOOM

Occupation

REAL ESTATE BROKER

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5681

Amount of Each Receipt this Period

2600.00

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

6200.00

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

 Use separate schedule(s)  
 for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PAULA N. GOWEN**

Mailing Address 316 SISSINGHURST DR

City

WEST CHESTER

State

PA

Zip Code

19382

FEC ID number of contributing federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.5927

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Ms. EVELYN GRAHAM**

Mailing Address 61 COXE STREET

City

HAZLETON

State

PA

Zip Code

18201

FEC ID number of contributing federal political committee.

C

Name of Employer

AD EASE, INC.

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		09		2014

Transaction ID : SA11AI.5929

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mr. JOEL K. GREENBERG**

Mailing Address 727 MERION SQUARE ROAD

City

GLAWYNE

State

PA

Zip Code

19035

FEC ID number of contributing federal political committee.

C

Name of Employer

SIG

Occupation

INVESTOR

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.6104

Amount of Each Receipt this Period

2600.00

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

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

3850.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 29 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. MICHAEL J GRETZ**

Mailing Address 1850 MONTGOMERY AVENUE

City

VILLANOVA

State

PA

Zip Code

19085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GRETZ BEER COMPANY

Occupation

PRESIDENT

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		08		2014

Transaction ID : SA11AI.5931

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**Mr. MICHAEL J GRETZ**

Mailing Address 1850 MONTGOMERY AVENUE

City

VILLANOVA

State

PA

Zip Code

19085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GRETZ BEER COMPANY

Occupation

PRESIDENT

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		26		2014

Transaction ID : SA11AI.5932

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**GVH PARTNERS**

Mailing Address ONE LIBERTY BOULEVARD

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		27		2014

Transaction ID : SA11AI.6120

Amount of Each Receipt this Period

1000.00

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

1800.00

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

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

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

FOR LINE NUMBER:

PAGE 30 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. PETER HAABESTAD**

Mailing Address 3 HEDGE ROW LANE

City

DEVON

State

PA

Zip Code

19333

FEC ID number of contributing federal political committee.

 C                    
Name of Employer  
GCP SERVICES CORPOccupation  
CONSULTANT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

                   

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		05		2014

Transaction ID : SA11AI.6050

Amount of Each Receipt this Period

                   

1000.00

Full Name (Last, First, Middle Initial)

**DAVID L. HACKETT**

Mailing Address 501 OAKCREST LN.

City

WALLINGFORD

State

PA

Zip Code

19086

FEC ID number of contributing federal political committee.

 C                   
Name of Employer  
BUCHANAN INGERSOLOccupation  
ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

                   

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5933

Amount of Each Receipt this Period

                   

250.00

Full Name (Last, First, Middle Initial)

**LOIS HAGARTY**
Mailing Address 1632 SPRUCE ST.  
#300

City

PHILADELPHIA

State

PA

Zip Code

19103

FEC ID number of contributing federal political committee.

 C                   
Name of Employer  
STATE STREET ADVISORSOccupation  
CONSULTANT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

                   

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.6106

Amount of Each Receipt this Period

                   

250.00

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

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

                   

1500.00

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

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

FOR LINE NUMBER:

PAGE 31 OF 158

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SCOTT B HAINES**

A.

Mailing Address 84 GREBE ROAD

City

SCHWENKSVILLE

State

PA

Zip Code

19473

FEC ID number of contributing federal political committee.

C

Name of Employer

HAINES &amp; KIBBLEHOUSE INC

Occupation

OWNER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2014

Transaction ID : SA11AI.6053

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**HANKIN GROUP**

B.

Mailing Address P.O. BOX 562

City

EXTON

State

PA

Zip Code

19341

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2014

Transaction ID : SA11AI.6121

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**MICHAEL J. HANLON**

C.

Mailing Address 929 MAYFIELD LANE

City

CHADDS FORD

State

PA

Zip Code

19317

FEC ID number of contributing federal political committee.

C

Name of Employer

BUCANAN INGERSOL

Occupation

ATTORNEY

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.6031

Amount of Each Receipt this Period

500.00

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

4000.00

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

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

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

FOR LINE NUMBER:

PAGE 32 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. BRIAN HARD**

Mailing Address 10 SEVEN SPRINGS DRIVE

City

READING

State

PA

Zip Code

19607

FEC ID number of contributing federal political committee.

C

Name of Employer

PENSKE TRUCK LEASING

Occupation

CEO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 20 / 2014

Transaction ID : SA11AI.5935

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Ms. JANICE M. HARD**

Mailing Address 10 SEVEN SPRINGS DRIVE

City

READING

State

PA

Zip Code

19607

FEC ID number of contributing federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 20 / 2014

Transaction ID : SA11AI.5937

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Ms. DONNA F. HARTNETT**

Mailing Address 2652 HORSHOE TRAIL

City

CHESTER SPRINGS

State

PA

Zip Code

19425

FEC ID number of contributing federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

Transaction ID : SA11AI.5939

Amount of Each Receipt this Period

2600.00

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

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

7800.00



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

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

FOR LINE NUMBER:

PAGE 33 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. VINCENT W. HARTNETT**

Mailing Address 2652 HORSHOE TRAIL

City

CHESTER SPRINGS

State

PA

Zip Code

19425

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

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5941

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**EDWARD J HAZZOURI**

Mailing Address 46 WARWICK ROAD

City

HADDONFIELD

State

NJ

Zip Code

08033

FEC ID number of contributing federal political committee.

C

Name of Employer

COZEN O'CONNOR

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		16		2014

Transaction ID : SA11AI.5771

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**SARA L HENDRICKS**

Mailing Address 373 BUCKINGHAM CIRCLE

City

HARLEYSVILLE

State

PA

Zip Code

19438

FEC ID number of contributing federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		01		2014

Transaction ID : SA11AI.5942

Amount of Each Receipt this Period

1000.00

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

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

4600.00

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

 Use separate schedule(s)  
 for each category of the  
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FOR LINE NUMBER:

PAGE 34 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. GREGORY S. HERB**

Mailing Address 2998 BURTON DRIVE

City

GILBERTSVILLE

State

PA

Zip Code

19525

FEC ID number of contributing federal political committee.

C

Name of Employer

HERB REAL ESTATE, INC

Occupation

BROKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		01		2014

Transaction ID : SA11AI.6055

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**Ms. KATHLEEN E. HEUPLER**

Mailing Address 70 PALMERS MILL ROAD

City

MEDIA

State

PA

Zip Code

19063

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 M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.5944

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Mr. S. DALE HIGH**

Mailing Address PO BOX 10008

City

LANCASTER

State

PA

Zip Code

17605

FEC ID number of contributing federal political committee.

C

Name of Employer

THE HIGH COS.

Occupation

CHAIRMAN

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		18		2014

Transaction ID : SA11AI.5946

Amount of Each Receipt this Period

1000.00

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

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

1550.00

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

 Use separate schedule(s)  
 for each category of the  
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FOR LINE NUMBER:

PAGE 35 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. DANIEL J HILFERTY**

Mailing Address 220 CEDARBROOK ROAD

City

ARDMORE

State

PA

Zip Code

19003

FEC ID number of contributing federal political committee.

C

Name of Employer

INDEPENDENCE BLUE CROSS

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		16		2014

Transaction ID : SA11AI.5948

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**FRANCIS J HOEY**

Mailing Address 1346 PENNSRIDGE PLACE

City

DOWNTOWN

State

PA

Zip Code

19335

FEC ID number of contributing federal political committee.

C

Name of Employer

HOEY INVESTMENTS, INC

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		08		2014

Transaction ID : SA11AI.5949

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mr. ALBERT D HOFFMAN**

Mailing Address 208 MILL POND DRIVE

City

EXTON

State

PA

Zip Code

19341

FEC ID number of contributing federal political committee.

C

Name of Employer

READ - CON, INC

Occupation

VP

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : SA11AI.5951

Amount of Each Receipt this Period

500.00

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

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

4000.00

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

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

FOR LINE NUMBER:

PAGE 36 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ALFRED HOFFMAN**

A.

Mailing Address 12530 SEMINOLE BEACH ROAD

City

NORTH PALM BEACH

State

FL

Zip Code

33408

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOFFMAN PARTNERSOccupation  
CHAIRMAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

Transaction ID : SA11AI.5686

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**ALFRED HOFFMAN**

B.

Mailing Address 12530 SEMINOLE BEACH ROAD

City

NORTH PALM BEACH

State

FL

Zip Code

33408

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOFFMAN PARTNERSOccupation  
CHAIRMAN

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

Transaction ID : SA11AI.5687

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Ms. DAWN HOFFMAN**

C.

Mailing Address 12530 SEMINOLE BEACH ROAD

City

NORTH PALM BEACH

State

FL

Zip Code

33408

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

Transaction ID : SA11AI.5683

Amount of Each Receipt this Period

2600.00

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

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

7800.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 37 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Ms. DAWN HOFFMAN**

Mailing Address 12530 SEMINOLE BEACH ROAD

City

NORTH PALM BEACH

State

FL

Zip Code

33408

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5684

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**TODD HUNTER HOFFMAN**Mailing Address 210 BYERS ROAD  
APT. 1R

City

CHESTER SPRINGS

State

PA

Zip Code

19425

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PEACE ON EARTHOccupation  
MANAGER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2014

Transaction ID : SA11AI.5952

Amount of Each Receipt this Period

900.00

Full Name (Last, First, Middle Initial)

**CLARK EATON HOPKINS**

Mailing Address 911 SAINT ANDREWS DRIVE

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ARTHREXOccupation  
PRESIDENT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2014

Transaction ID : SA11AI.6027

Amount of Each Receipt this Period

500.00

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

4000.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RICHARD W IRELAND**

A.

Mailing Address 120 S WARNER ROAD

City

KING OF PRUSSIA

State

PA

Zip Code

19406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VALLEY FORGE INVESTMENT

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 07 / 2014

Transaction ID : SA11AI.5953

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**RICHARD W IRELAND**

B.

Mailing Address 120 S WARNER ROAD

City

KING OF PRUSSIA

State

PA

Zip Code

19406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VALLEY FORGE INVESTMENT

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 07 / 2014

Transaction ID : SA11AI.5954

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Ms. MELINDA M JAMES**

C.

Mailing Address 948 GARLINGTON CIRCLE

City

WEST CHESTER

State

PA

Zip Code

19380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

Transaction ID : SA11AI.5956

Amount of Each Receipt this Period

2600.00

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

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

7800.00

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

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

FOR LINE NUMBER: PAGE 39 OF 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**KEVIN L. JOHNSON**

**A.**

Mailing Address 1759 HAMILTON DRIVE

City

PHOENIXVILLE

State

PA

Zip Code

19460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRAFFIC PLANNING DESIGN INC

Occupation

TRANSPORTATION ENGINEER

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

3900.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 12 / 2014

**Transaction ID : SA11AI.6109**

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**KEVIN L. JOHNSON**

**B.**

Mailing Address 1759 HAMILTON DRIVE

City

PHOENIXVILLE

State

PA

Zip Code

19460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRAFFIC PLANNING DESIGN INC

Occupation

TRANSPORTATION ENGINEER

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 12 / 2014

**Transaction ID : SA11AI.6110**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**DAVID KELLY**

**C.**

Mailing Address 3 MCCOY COURT

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMCAST SPOTLIGHT

Occupation

SENIOR VP OF ADVERTISING SALES

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 02 / 2014

**Transaction ID : SA11AI.5957**

Amount of Each Receipt this Period

500.00

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

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

1500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 40 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. MARTIN J KENDRA**

Mailing Address 8 HASTINGS LANE

City

SPRING CITY

State

PA

Zip Code

19475

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BIRDSBORO PHARMACY

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		15		2014

Transaction ID : SA11AI.5959

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Mr. MICHAEL L KICHLINE**

Mailing Address 287 KELLER ROAD

City

BERWYN

State

PA

Zip Code

19312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DECHERT, LLP

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5961

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Ms. MICHELLE H KICHLINE**

Mailing Address 287 KELLER ROAD

City

BERWYN

State

PA

Zip Code

19312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TREDYFFRIN TOWNSHIP

Occupation

SUPERVISOR

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5963

Amount of Each Receipt this Period

2600.00

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

5450.00



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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**RYAN COSTELLO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>HANNAH W. KIMMEL</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2014	
Mailing Address 140 SUNNYHILL ROAD		<b>Transaction ID : SA11AI.5964</b>	
City EXTON	State PA	Zip Code 19341	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. JAY I KISLAK</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2014	
Mailing Address 7900 MIAMI LAKES DRIVE WEST		<b>Transaction ID : SA11AI.5689</b>	
City MIAMI LAKE	State FL	Zip Code 33016	Amount of Each Receipt this Period _____ 2600.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer THE KISLAK ORGANIZATION	Occupation CHAIRMAN		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2600.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mr. JAY I KISLAK</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2014	
Mailing Address 7900 MIAMI LAKES DRIVE WEST		<b>Transaction ID : SA11AI.5690</b>	
City MIAMI LAKE	State FL	Zip Code 33016	Amount of Each Receipt this Period _____ 2600.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer THE KISLAK ORGANIZATION	Occupation CHAIRMAN		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 5200.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		_____ 5700.00	
<b>TOTAL</b> This Period (last page this line number only).....		_____	

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DALE N. KRAPP**

A.

Mailing Address 220 HUNTING HILL LN.

City

WEST CHESTER

State

PA

Zip Code

19380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KRAPP BUS COMPANIES

Occupation

OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3600.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 03 / 2014

Transaction ID : SA11AI.6064

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mr. JAY KREILING**

B.

Mailing Address 1329 EMERSON COURT

City

AMBLER

State

PA

Zip Code

19002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMCAST CORP.

Occupation

MANAGER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 16 / 2014

Transaction ID : SA11AI.5966

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**WILLIAM KRONENBERG III**

C.

Mailing Address 704 HAYWOOD DRIVE

City

EXTON

State

PA

Zip Code

19341

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FREESTART DEVELOPMENT COMPANY

Occupation

PRINCIPAL

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 28 / 2014

Transaction ID : SA11AI.6046

Amount of Each Receipt this Period

2600.00

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

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

4100.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. M. RONALD KRONGOLD**

Mailing Address 130 SOUTH HIBISCUS DRIVE

City

MIAMI BEACH

State

FL

Zip Code

33139

FEC ID number of contributing federal political committee.

C

Name of Employer

GOLD KROWN

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5692

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**Ms. KATHRYN LEHMAN**

Mailing Address 3106 RUSSELL ROAD

City

ALEXANDRIA

State

VA

Zip Code

22305

FEC ID number of contributing federal political committee.

C

Name of Employer

HOLLAND AND KIGHT

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		12		2014

Transaction ID : SA11AI.6207

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JAMES S LEIBY**

Mailing Address 2370 TURNBURY ROAD

City

GILBERTSVILLE

State

PA

Zip Code

19525

FEC ID number of contributing federal political committee.

C

Name of Employer

CERTA PRO PAINTERS, ITD

Occupation

CFO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : SA11AI.5968

Amount of Each Receipt this Period

250.00

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

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

3250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LEWIS, ECKERT, ROBB, & CO.**Mailing Address 502 W. GERMANTOWN PIKE  
SUITE 425

City	State	Zip Code
PLYMOUTH MEETING	PA	19462

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		09		2014

Transaction ID : SA11AI.6123

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mr. DAVID F. LINCOLN**

Mailing Address 314 KENT ROAD

City	State	Zip Code
WYNNEWOOD	PA	19096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

ELEMENT PARTNERS

EXECUTIVE

Receipt For: 2014

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : SA11AI.5970

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mr. KEVIN J. LOFTUS**

Mailing Address 122 E. CENTRAL AVENUE

City	State	Zip Code
MOORESTOWN	NJ	08057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

LOFTUS CONSTRUCTION

OWNER

Receipt For: 2014

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

Transaction ID : SA11AI.5773

Amount of Each Receipt this Period

500.00

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

2500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. THOMAS H LOWRY**

Mailing Address 116 WINDRIDGE ROAD

City

WEST CHESTER

State

PA

Zip Code

19380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MUNICIPAL SUPPORT SERVICES, INC.

Occupation

PRINCIPAL

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.6073

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**MR RICHARD MABLE**

Mailing Address 214 SAMIBEL LANE

City

WYOMISSING

State

PA

Zip Code

19610

FEC ID number of contributing  
federal political committee.

C

Name of Employer

READING HEALTH SYSTEM

Occupation

SVP

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.6086

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**PATRICIA MACCABE**

Mailing Address P.O.BOX 590

City

MONTGOMERYVILLE

State

PA

Zip Code

18936

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		21		2014

Transaction ID : SA11AI.5974

Amount of Each Receipt this Period

250.00

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

800.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THOMAS MACCABE****A.**

Mailing Address P.O.BOX 590

City

MONTGOMERYVILLE

State

PA

Zip Code

18936

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		21		2014

Transaction ID : SA11AI.5972

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Mr. MICHAEL MAHOLICK****B.**

Mailing Address 101 TERWOOD LANE

City

LANSDALE

State

PA

Zip Code

19446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		27		2014

Transaction ID : SA11AI.5976

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mr. CHARLES D. MANDRACCHIA****C.**Mailing Address 2024 CRESSMAN ROAD  
P.O.BOX 1229

City

SKIPPACK

State

PA

Zip Code

19474

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		01		2014

Transaction ID : SA11AI.6101

Amount of Each Receipt this Period

300.00

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

1550.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. DECLAN H. MANNION**

Mailing Address 8 FOX RUN LANE

City

NEWTOWN SQUARE

State

PA

Zip Code

19073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MOLLY MAGUIRESOccupation  
OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5978

Amount of Each Receipt this Period

1300.00

Full Name (Last, First, Middle Initial)

**JEROME I MARCUS**

Mailing Address PO BOX 6467

City

READING

State

PA

Zip Code

19610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OMEGA MEDICAL LABORATORIESOccupation  
DOCTOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : SA11AI.5979

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Mr. RODNEY D MARTIN**

Mailing Address 64 ROBIN HILL RD

City

BECHTELSTVILLE

State

PA

Zip Code

19505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MARTIN STONE QUARRIESOccupation  
VICE PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		09		2014

Transaction ID : SA11AI.5579

Amount of Each Receipt this Period

250.00

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

4150.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SANDRA GILL MARTIN**

A.

Mailing Address 611 EAST REECEVILLE ROAD

City

DOWNINGTOWN

State

PA

Zip Code

19335

FEC ID number of contributing federal political committee.

C

Name of Employer  
MCCORMICK TAYLOROccupation  
ENGINEER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 27 / 2014

Transaction ID : SA11AI.5980

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Mr. ROBERT A MARTINO**

B.

Mailing Address P.O. BOX 1289

City

SKIPPACK

State

PA

Zip Code

19474

FEC ID number of contributing federal political committee.

C

Name of Employer  
RAM CONSTRUCTION COMPANYOccupation  
OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 15 / 2014

Transaction ID : SA11AI.6085

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**HEIDI B MASANO**

C.

Mailing Address 602 TRENT AVE

City

WYOMISSING

State

PA

Zip Code

19610

FEC ID number of contributing federal political committee.

C

Name of Employer  
MASANO BRADLEYOccupation  
LAWYER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 05 / 2014

Transaction ID : SA11AI.6069

Amount of Each Receipt this Period

2600.00

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

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

3350.00



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

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Ms. SUZANNE S. MAYES**

Mailing Address 317 POWERHORN ROAD

City

FORT WASHINGTON

State

PA

Zip Code

19034

FEC ID number of contributing federal political committee.

C

Name of Employer  
COZEN O'CONNOROccupation  
ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.5982

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Mr. EDWARD W. MCASSEY**

Mailing Address 3 WYNDEMERE LAKE DRIVE

City

CHESTER SPRINGS

State

PA

Zip Code

19425

FEC ID number of contributing federal political committee.

C

Name of Employer  
LASKO PRODUCTS, INC.Occupation  
COO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5984

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ROBERT E MCCANN**

Mailing Address 21 PENNROSE TALLEY

City

GARNET VALLEY

State

PA

Zip Code

19060

FEC ID number of contributing federal political committee.

C

Name of Employer  
MCCANN, SCHAIBLE, & WALL, LLCOccupation  
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : SA11AI.5985

Amount of Each Receipt this Period

1000.00

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

2500.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BRIAN G MCELWEE**

A.

Mailing Address PO BOX 837

City

VALLEY FORGE

State

PA

Zip Code

19482

FEC ID number of contributing federal political committee.

C

Name of Employer

VALLEY FORGE INVESTMENT

Occupation

OWNER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Transaction ID : SA11AI.5986

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**BRIAN G MCELWEE**

B.

Mailing Address PO BOX 837

City

VALLEY FORGE

State

PA

Zip Code

19482

FEC ID number of contributing federal political committee.

C

Name of Employer

VALLEY FORGE INVESTMENT

Occupation

OWNER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Transaction ID : SA11AI.5987

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Mr. TERRENCE J. MCGLINN**

C.

Mailing Address 562 BROWNSVILLE ROAD

City

SINKING SPRING

State

PA

Zip Code

19608

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

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.5989

Amount of Each Receipt this Period

1000.00

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

6200.00

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

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOHN MCGOWAN, JR**

Mailing Address 149 GRUBB ROAD

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing federal political committee.

C

Name of Employer

JAECO FLUID SYSTEMS, INC

Occupation

CHAIRMAN &amp; CEO

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2014

Transaction ID : SA11AI.6059

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mr. FRANCIS MCGOWEN**

Mailing Address 117 JAFFREY ROAD

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing federal political committee.

C

Name of Employer

CAR SENSE

Occupation

OWNER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2014

Transaction ID : SA11AI.5991

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**JENIFFER C. MCNEIL**

Mailing Address 301 FIVE POINT RD.

City

COATESVILLE

State

PA

Zip Code

19320

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

Transaction ID : SA11AI.5993

Amount of Each Receipt this Period

2600.00

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

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

4600.00

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

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

FOR LINE NUMBER:

PAGE 52 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ROBERT D. MCNEIL**

A.

Mailing Address 301 FIVE POINT RD.

City

COATESVILLE

State

PA

Zip Code

19320

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

Transaction ID : SA11AI.5992

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**MR JOHN MCTEAR**

B.

Mailing Address 991 MAULE LANE

City

WEST CHESTER

State

PA

Zip Code

19382

FEC ID number of contributing federal political committee.

C

Name of Employer

CMS LOGISTICS

Occupation

CFO

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2014

Transaction ID : SA11AI.5830

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**Mr. THOMAS MOOGAN**

C.

Mailing Address 1716 LANDIS ROAD  
P.O. BOX 841

City

WORCESTER

State

PA

Zip Code

19490

FEC ID number of contributing federal political committee.

C

Name of Employer

DIGITAL SYSTEMS GROUP, INC

Occupation

CFO

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5995

Amount of Each Receipt this Period

1000.00

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

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

3700.00

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

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

FOR LINE NUMBER: PAGE 53 OF 158

(check only one)

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

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 NAME OF COMMITTEE (In Full)  
**RYAN COSTELLO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Ms. MOLLY K. MORRISON</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	06		30		2014
M M M	/	D D D	/	Y Y Y Y Y										
06		30		2014										
Mailing Address 1315 SOUTH CONCORD ROAD			<b>Transaction ID : SA11AI.5581</b>											
City	State	Zip Code												
WEST CHESTER	PA	19382												
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>		250.00									
250.00														
Name of Employer NATURAL LANDS TRUST		Occupation PRESIDENT												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>			250.00									
250.00														

  

<b>B.</b> Full Name (Last, First, Middle Initial) <b>DAVID W. MOSER</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	06		26		2014
M M M	/	D D D	/	Y Y Y Y Y										
06		26		2014										
Mailing Address PO BOX 566			<b>Transaction ID : SA11AI.6039</b>											
City	State	Zip Code												
EXTON	PA	19341												
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>		500.00									
500.00														
Name of Employer DFT INC.		Occupation PRESIDENT												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">4500.00</td> </tr> </table>			4500.00									
4500.00														

  

<b>C.</b> Full Name (Last, First, Middle Initial) <b>RICHARD L. MULL</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>08</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	05		08		2014
M M M	/	D D D	/	Y Y Y Y Y										
05		08		2014										
Mailing Address 801 HECKEL AVENUE			<b>Transaction ID : SA11AI.5862</b>											
City	State	Zip Code												
SPRING CITY	PA	19475												
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">200.00</td> </tr> </table>		200.00									
200.00														
Name of Employer RETIRED		Occupation RETIRED												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">450.00</td> </tr> </table>			450.00									
450.00														

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">950.00</td> </tr> </table>		950.00				
950.00									
<b>TOTAL</b> This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>						

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 54 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Ms. JOAN L MURRAY**

Mailing Address 10020 CORINTHIAN DRIVE

City

STONE HARBOR

State

NJ

Zip Code

08247

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

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : SA11AI.5775

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Mr. W. THOMAS MUSSER**

Mailing Address 2015 MARLBORO ROAD

City

KENNETT SQUARE

State

PA

Zip Code

19348

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE TRI-M GROUP, LLC

Occupation

CHAIRMAN

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		18		2014

Transaction ID : SA11AI.5997

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Mr. A. ROSS MYERS**

Mailing Address P.O BOX 140

City

SKIPPACK

State

PA

Zip Code

19474

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN INFRASTRUCTURE

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		15		2014

Transaction ID : SA11AI.6024

Amount of Each Receipt this Period

250.00

**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:

PAGE 55 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. A. ROSS MYERS**

Mailing Address P.O BOX 140

City

SKIPPACK

State

PA

Zip Code

19474

FEC ID number of contributing federal political committee.

C

Name of Employer

AMERICAN INFRASTRUCTURE

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.6025

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ALAN PAUL NOVAK**

Mailing Address 1302 W. CHESTER RD.

City

COATESVILLE

State

PA

Zip Code

19320

FEC ID number of contributing federal political committee.

C

Name of Employer

NOVAK STRATEGIC ADVISORS

Occupation

OWNER

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		21		2014

Transaction ID : SA11AI.6077

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mr. THOMAS G PAESE**

Mailing Address 1933 19TH STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20009

FEC ID number of contributing federal political committee.

C

Name of Employer

BUCHANAN INGERSOLL ROONEY

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		09		2014

Transaction ID : SA11AI.5598

Amount of Each Receipt this Period

500.00

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

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

2500.00

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

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

FOR LINE NUMBER:

PAGE 56 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. DAKX PARGHI**

Mailing Address 3 ELLIOT COURT

City

VOORHEES

State

NJ

Zip Code

08043

FEC ID number of contributing federal political committee.

C

Name of Employer

SRI CAPITAL

Occupation

PARTNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

Transaction ID : SA11AI.5777

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Ms. BRITTA PEKOFKY**

Mailing Address 36 NORTH FORGE MANOR DRIVE

City

PHOENIXVILLE

State

PA

Zip Code

19460

FEC ID number of contributing federal political committee.

C

Name of Employer

PROVIDENCE REALTY SERVICES, INC

Occupation

REAL ESTATE BROKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 20 / 2014

Transaction ID : SA11AI.5999

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**JIM PERELLA**

Mailing Address MILL MANOR FARM  
820 VALLEY CREEK ROAD

City

WEST CHESTER

State

PA

Zip Code

19380

FEC ID number of contributing federal political committee.

C

Name of Employer

LASKO PRODUCTS, INC.

Occupation

EXECUTIVE VICE PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2014

Transaction ID : SA11AI.6000

Amount of Each Receipt this Period

1000.00

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

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

1750.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 57 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DALE L. PETROVITCH****A.**

Mailing Address 101 E. BROOKHAVEN RD.

City

WALLINGFORD

State

PA

Zip Code

19086

FEC ID number of contributing  
federal political committee.

C

Name of Employer

METROPOLITAN COMMUNICATIONS

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

4900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2014

**Transaction ID : SA11AI.6071**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**DOREEN K. PETROVITCH****B.**

Mailing Address 101 E. BROOKHAVEN RD.

City

WALLINGFORD

State

PA

Zip Code

19086

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

4900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2014

**Transaction ID : SA11AI.6056**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**ROBERT B. PRIEST****C.**

Mailing Address 562 PENTLER DRIVE

City

EXTON

State

PA

Zip Code

19301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2014

**Transaction ID : SA11AI.6089**

Amount of Each Receipt this Period

1000.00

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

6000.00

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

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

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

FOR LINE NUMBER:

PAGE 58 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. DAVID REGN**

Mailing Address 1787 TERESA CT

City

DOWNINGTOWN

State

PA

Zip Code

19335

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

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 10 / 2014

Transaction ID : SA11AI.6002

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**Mr. JAMES S. RIDGE Jr.**

Mailing Address 411 CARPENTERS COVE LANE

City

DOWNINGTOWN

State

PA

Zip Code

19335

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FANNIE MAE

Occupation  
INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 01 / 2014

Transaction ID : SA11AI.6045

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**Mr. THOMAS A RILEY Jr.**

Mailing Address P.O. BOX 1265

City

EXTON

State

PA

Zip Code

19341

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RILEY RIPER HOLLIN & COLAGRECO

Occupation  
INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 17 / 2014

Transaction ID : SA11AI.6095

Amount of Each Receipt this Period

600.00

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

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

3400.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 59 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. THOMAS A RILEY Jr.****A.**

Mailing Address P.O. BOX 1265

City

EXTON

State

PA

Zip Code

19341

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RILEY RIPER HOLLIN &amp; COLAGRECO

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : SA11AI.6096

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mr. THOMAS A RILEY Jr.****B.**

Mailing Address P.O. BOX 1265

City

EXTON

State

PA

Zip Code

19341

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RILEY RIPER HOLLIN &amp; COLAGRECO

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		27		2014

Transaction ID : SA11AI.6094

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**RONI FIT, LLC****C.**

Mailing Address 437 PENNSYLVANIA AVENUE

City

FORT WASHINGTON

State

PA

Zip Code

19034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		06		2014

Transaction ID : SA11AI.6125

Amount of Each Receipt this Period

250.00

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

1750.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**RYAN COSTELLO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>JOHN ROOD</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014	
Mailing Address 3030 HARTLEY ROAD SUITE 310		<b>Transaction ID : SA11AI.5693</b>	
City JACKSONVILLE	State FL	Zip Code 32257	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer VESTCOR	Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Ms. SONYA ROOD</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014	
Mailing Address 3030 HARTLEY ROAD SUITE 310		<b>Transaction ID : SA11AI.5695</b>	
City JACKSONVILLE	State FL	Zip Code 32257	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>W. GREG ROTHMAN</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014	
Mailing Address 1 GUNPOWDER ROAD		<b>Transaction ID : SA11AI.6097</b>	
City MECHANICSBURGH	State PA	Zip Code 17050	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer RSR REALTORS	Occupation REAL ESTATE BROKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		6200.00	
<b>TOTAL</b> This Period (last page this line number only).....			

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

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

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. JOSEPH RUBINO**

Mailing Address 22 MILL LANE

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing federal political committee.

C

Name of Employer

KNICKERBOCKER LANDS LLC

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		27		2014

Transaction ID : SA11AI.6063

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. ROBERT A RUGGIERO**

Mailing Address 1728 HIBBERD LANE

City

WEST CHESTER

State

PA

Zip Code

19380

FEC ID number of contributing federal political committee.

C

Name of Employer

PA ORTHOPEDIC CENTER

Occupation

ORTHOPEDIC SURGEON

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.6081

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. JOHN M. RYAN**

Mailing Address 102 MINFFORD ROAD

City

BALA CYNWYD

State

PA

Zip Code

19004

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.6004

Amount of Each Receipt this Period

500.00

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

1250.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. ANDREW SABIN**

Mailing Address P.O. BOX 968

City

AMAGANSETT

State

NY

Zip Code

11930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SABIN METAL CORPORATION

Occupation

CEO

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5785

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Mr. ANDREW SABIN**

Mailing Address P.O. BOX 968

City

AMAGANSETT

State

NY

Zip Code

11930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SABIN METAL CORPORATION

Occupation

CEO

Receipt For: 2014

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5786

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Ms. WHITNEY A SANDERS**

Mailing Address 408 WESTBURY DRIVE

City

WYOMISSING

State

PA

Zip Code

19610

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

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2014

Transaction ID : SA11AI.6006

Amount of Each Receipt this Period

500.00

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

5700.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SAUL EWING LLP****A.**

Mailing Address 1500 MARKET STREET, 38TH FLOOR

City

PHILADELPHIA

State

PA

Zip Code

19102-2186

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.6126

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Mr. DWIGHT C SCHAR****B.**

Mailing Address 505 SOUTH FLAGLER DRIVE

City

WEST PALM BEACH

State

FL

Zip Code

33401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5697

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Mr. DWIGHT C SCHAR****C.**

Mailing Address 505 SOUTH FLAGLER DRIVE

City

WEST PALM BEACH

State

FL

Zip Code

33401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5698

Amount of Each Receipt this Period

2600.00

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

5700.00

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

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Ms. MARTHA SCHAR</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>05 / 19 / 2014</div> </div>	
Mailing Address 505 SOUTH FLAGLER DRIVE		<b>Transaction ID : SA11AI.5700</b>  Amount of Each Receipt this Period <div> <div></div> <div>2600.00</div> </div>	
City WEST PALM BEACH	State FL		Zip Code 33401
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>2600.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>Ms. MARTHA SCHAR</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>05 / 19 / 2014</div> </div>	
Mailing Address 505 SOUTH FLAGLER DRIVE		<b>Transaction ID : SA11AI.5701</b>  Amount of Each Receipt this Period <div> <div></div> <div>2600.00</div> </div>	
City WEST PALM BEACH	State FL		Zip Code 33401
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>5200.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>Mr. EDWARD G. SCHMID</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>05 / 20 / 2014</div> </div>	
Mailing Address 178 INDIAN HANNA ROAD		<b>Transaction ID : SA11AI.6008</b>  Amount of Each Receipt this Period <div> <div></div> <div>250.00</div> </div>	
City WEST CHESTER	State PA		Zip Code 19382
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>250.00</div> </div>		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<div> <div></div> <div>5450.00</div> </div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div> <div></div> <div></div> </div>



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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. ARNOLD C. SCHNEIDER III**

Mailing Address 826 TURNBRIDGE ROAD

City

WAYNE

State

PA

Zip Code

19087

FEC ID number of contributing federal political committee.

C

Name of Employer

SCHNEIDER CAPITAL MANAGEMENT

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 02 / 2014

Transaction ID : SA11AI.6099

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**MARY M SCHNEIDER**

Mailing Address 826 TURNBRIDGE ROAD

City

WAYNE

State

PA

Zip Code

19087

FEC ID number of contributing federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 02 / 2014

Transaction ID : SA11AI.6057

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Mr. WARREN L SCHWERIN**

Mailing Address 667 OCEAN ROAD

City

VERO BEACH

State

FL

Zip Code

32963

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

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

Transaction ID : SA11AI.5703

Amount of Each Receipt this Period

2600.00

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

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

7800.00

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

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mr. WARREN L SCHWERIN**

Mailing Address 667 OCEAN ROAD

City

VERO BEACH

State

FL

Zip Code

32963

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

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

Transaction ID : SA11AI.5704

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Ms. CAROLYN SEIDLE**

Mailing Address 20 STURBRIDGE LANE

City

WAYNE

State

PA

Zip Code

19087

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

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 18 / 2014

Transaction ID : SA11AI.6010

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**HOLLY SETZLER**

Mailing Address 21 RED ROCK LANE

City

CHESTER SPRINGS

State

PA

Zip Code

19425

FEC ID number of contributing federal political committee.

C

Name of Employer

LANDIS &amp; SETZLER, PC

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11AI.6065

Amount of Each Receipt this Period

1000.00

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

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

4100.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ALAN SHUMAN****A.**

Mailing Address 50 NORTH 5TH STREET

City

READING

State

PA

Zip Code

19601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SHUMAN DEVELOPMENT GROUP

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

**Transaction ID : SA11AI.6102**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mr. GARY SILVI****B.**

Mailing Address 1100 BRYNLAWN ROAD

City

VILLANOVA

State

PA

Zip Code

19085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VESPER PROPERTY GROUP

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

**Transaction ID : SA11AI.6112**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**JOSEPH S. SOLOMON****C.**

Mailing Address 70 PALMERS MILL ROAD

City

MEDIA

State

PA

Zip Code

19063

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PROVIDENT ENERGY CONSULTING, LLC

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

**Transaction ID : SA11AI.6022**

Amount of Each Receipt this Period

250.00

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

2250.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MANUEL STAMATAKIS**

Mailing Address 1111 W DEKALB PIKE

City

WAYNE

State

PA

Zip Code

19087

FEC ID number of contributing federal political committee.

C

Name of Employer

CME BENEFITS CONSULTING

Occupation

CHAIRMAN AND CEO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 24 / 2014

Transaction ID : SA11AI.6036

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**STRADLEY RONON STEVENS & YOUNG, LLP**

Mailing Address 2005 MARKET ST  
SUITE 2600

City

PHILADELPHIA

State

PA

Zip Code

19103

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 22 / 2014

Transaction ID : SA11AI.6128

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**Mr. STEVEN R TANENBAUM**

Mailing Address 229 GLENMOOR ROAD

City

GLADWYNE

State

PA

Zip Code

19035

FEC ID number of contributing federal political committee.

C

Name of Employer

A WISH COME TRUE

Occupation

CHAIRMAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

Transaction ID : SA11AI.6012

Amount of Each Receipt this Period

2600.00

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

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

9600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ROBERT S TAYLOR****A.**

Mailing Address PO BOX 220

City

SOLEBURY

State

PA

Zip Code

18963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE CAMERON COMPANIES, LLC

Occupation

CHAIRMAN &amp; CEO

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : SA11AI.6013

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Dr. JOHN M TEMPLETON****B.**

Mailing Address 601 PEMBROKE ROAD

City

BRYN MAWR

State

PA

Zip Code

19010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JOHN TEMPLETON FOUNDATION

Occupation

PRESIDENT

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.6061

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Dr. JOHN M TEMPLETON****C.**

Mailing Address 601 PEMBROKE ROAD

City

BRYN MAWR

State

PA

Zip Code

19010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JOHN TEMPLETON FOUNDATION

Occupation

PRESIDENT

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.6062

Amount of Each Receipt this Period

2600.00

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

6200.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Mrs. JOSEPHINE J. TEMPLETON**

Mailing Address 601 PEMBROKE ROAD

City

BRYN MAWR

State

PA

Zip Code

19010

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

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.6091

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Mrs. JOSEPHINE J. TEMPLETON**

Mailing Address 601 PEMBROKE ROAD

City

BRYN MAWR

State

PA

Zip Code

19010

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

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.6092

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**UNIVERSITY CITY HOUSING ASSOCIATES**

Mailing Address P.O. BOX 1524

City

BRYN MAWR

State

PA

Zip Code

19010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.6130

Amount of Each Receipt this Period

2600.00

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

7800.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JAMES W VAN BUREN**

A.

Mailing Address 155 STRATFORD COURT

City

HOLLIDAYSBURG

State

PA

Zip Code

16648

FEC ID number of contributing  
federal political committee.

Name of Employer

NEW ENTERPRISE STONE &amp; LIME CO.

Occupation

VICE PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		15		2014

Transaction ID : SA11AI.6074

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**Mr. CHRISTOPHER M. VENO**

B.

Mailing Address 1750 NORTH VALLEY ROAD

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

Name of Employer

TRION

Occupation

OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		27		2014

Transaction ID : SA11AI.6015

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**RICHARD WALLING**

C.

Mailing Address 700 MILL CREEK ROAD

City

GLADWYNE

State

PA

Zip Code

19035

FEC ID number of contributing  
federal political committee.

Name of Employer

EXPRESS MARINE INC

Occupation

CEO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		27		2014

Transaction ID : SA11AI.6043

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  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**RYAN COSTELLO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mr. ROBERT WATTS</b>			Date of Receipt M M / D D / Y Y Y Y 05 / 06 / 2014	
Mailing Address 1 LAFAYETTE CIRCLE			<b>Transaction ID : SA11AI.6017</b>	
City	State	Zip Code	Amount of Each Receipt this Period 250.00	
DOWNINGTOWN	PA	19335		
FEC ID number of contributing federal political committee.		C		
Name of Employer CCSWA		Occupation DIRECTOR		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. GUNTRAM WEISSENBERGER</b>			Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2014	
Mailing Address 550 AMERICAN AVENUE			<b>Transaction ID : SA11AI.6108</b>	
City	State	Zip Code	Amount of Each Receipt this Period 500.00	
KING OF PRUSSIA	PA	19406		
FEC ID number of contributing federal political committee.		C		
Name of Employer THE WESTOVER COMPANIES		Occupation STRADLEY RONON STEVENS & YOUNG, LL		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mr. RICHARD P WHITTAKER</b>			Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2014	
Mailing Address 1300 BEAUMONT LANE			<b>Transaction ID : SA11AI.6079</b>	
City	State	Zip Code	Amount of Each Receipt this Period 500.00	
POTTSTOWN	PA	19464		
FEC ID number of contributing federal political committee.		C		
Name of Employer ORTHOPAEDIC SPECIALISTS OF POTTSTOV		Occupation ORHOPAEDIST		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1250.00	
<b>TOTAL</b> This Period (last page this line number only).....				



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CHRIS WILLIAMS****A.**

Mailing Address 342 SUNDANCE DRIVE

City

CHESTER SPRINGS

State

PA

Zip Code

19425

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCMAHON ASSOCIATES, INC

Occupation

VICE PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		01		2014

**Transaction ID : SA11AI.6070**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**Ms. JANINE YASS****B.**

Mailing Address 214 CHESWORLD LANE

City

HAVERFORD

State

PA

Zip Code

19041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		21		2014

**Transaction ID : SA11AI.6021**

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**Mr. JEFF YASS****C.**

Mailing Address 241 CHESWOLD LANE

City

HAVERFORD

State

PA

Zip Code

19041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SIG

Occupation

INVESTOR

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		13		2014

**Transaction ID : SA11AI.6019**

Amount of Each Receipt this Period

2600.00

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

5500.00

272000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ACE GROUP PAC**

Mailing Address 901 F STREET, NW

SUITE 550

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11C.5602

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**AETNA INC. POLITICAL ACTION COMMITTEE**

Mailing Address 20 F STREET, NW

SUITE 350

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11C.5604

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**AIR LINE PILOTS ASSOCIATION INTERNATIONAL PAC**

Mailing Address 1625 MASSACHUSETTS AVE, NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		19		2014

Transaction ID : SA11C.5606

Amount of Each Receipt this Period

2500.00

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

10000.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AIR PRODUCTS POLITICAL ALLIANCE**

Mailing Address PO BOX 441

City

TREXLERTOWN

State

PA

Zip Code

18087

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		23		2014

Transaction ID : SA11C.6132

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. ALTICOR PAC**

Mailing Address 7575 FULTON STREET EAST

City

ADA

State

MI

Zip Code

49355

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11C.5746

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. ALTRIA GROUP, INC POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVE, NW  
SUITE 400W

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11C.5608

Amount of Each Receipt this Period

1000.00

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

3000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)****A.**

Mailing Address 1120 CONNECTICUT AVENUE NW

SUITE 600

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.**C** C00004275

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2014

**Transaction ID : SA11C.5610**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)****B.**

Mailing Address 1120 CONNECTICUT AVENUE NW

SUITE 600

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.**C** C00004275

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

**Transaction ID : SA11C.5611**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)****C.**

Mailing Address 1015 15TH ST. NW

SUITE 802

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00010868

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

**Transaction ID : SA11C.5613**

Amount of Each Receipt this Period

2000.00

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

9500.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE**

A.

Mailing Address PO BOX 70980

City

WASHINGTON

State

DC

Zip Code

20024

FEC ID number of contributing  
federal political committee.

**C** C00006080

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

Transaction ID : SA11C.5615

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**AMERICAN LEGACY POLITICAL ACTION COMMITTEE**

B.

Mailing Address 1220 L ST., NW  
SUITE 100-165

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00488304

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  
06 / 17 / 2014

Transaction ID : SA11C.5617

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AMERICAN LIBERTY AND NATION PAC (ALAN PAC)**

C.

Mailing Address 438 EAST MAIN STREET  
POST OFFICE BOX 7092

City

TUPELO

State

MS

Zip Code

38802

FEC ID number of contributing  
federal political committee.

**C** C00495150

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  
06 / 10 / 2014

Transaction ID : SA11C.5756

Amount of Each Receipt this Period

1000.00

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

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

4500.00

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

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FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

A.

Mailing Address 1111 NORTH FAIRFAX ST.

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C C00012880

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  
05 / 19 / 2014

Transaction ID : SA11C.6237

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address 520 N. NORTHWEST HIGHWAY

City

PARK RIDGE

State

IL

Zip Code

60068

FEC ID number of contributing  
federal political committee.

C C00255752

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  
05 / 22 / 2014

Transaction ID : SA11C.5719

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)

Mailing Address 1300 MORRIS DRIVE  
SUITE 100

City

CHESTERBROOK

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C C00400929

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 20 / 2014

Transaction ID : SA11C.6134

Amount of Each Receipt this Period

1000.00

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

8000.00

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

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

 Use separate schedule(s)  
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 (check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ANDY HARRIS FOR CONGRESS**

Mailing Address PO BOX 604

City

BEL AIR

State

MD

Zip Code

21014

FEC ID number of contributing federal political committee.

**C** C00435974

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2014

Transaction ID : SA11C.5739

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ANN PAC**

Mailing Address P.O. BOX 3535

City

BALLWIN

State

MO

Zip Code

63022

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2014

Transaction ID : SA11C.5753

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AON CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 200 EAST RANDOLPH DRIVE

City

CHICAGO

State

IL

Zip Code

60601

FEC ID number of contributing federal political committee.

**C** C00211250

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11C.5721

Amount of Each Receipt this Period

1500.00

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

3500.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ARAPAC**

A.

Mailing Address 1156 15TH STREET NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11C.5619

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ARENT FOX LLP PAC (AFPAC)**

B.

Mailing Address ARENT FOX LLP

1717 K STREET NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00241380

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11C.5621

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ASSOCIATED BUILDERS AND CONTRACTORS**

C.

Mailing Address 1300 NORTH 17TH STREET SUITE 800

City

ROSSLYN

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.

**C** C70003355

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11C.5600

Amount of Each Receipt this Period

5000.00

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

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

7000.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A.**

Mailing Address 11921 FREEDOM DRIVE  
SUITE 1100

City	State	Zip Code
RESTON	VA	20190

FEC ID number of contributing federal political committee.

**C** C00447565

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  
05 / 22 / 2014

Transaction ID : SA11C.6211

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**B.**

Mailing Address 11921 FREEDOM DRIVE  
SUITE 1100

City	State	Zip Code
RESTON	VA	20190

FEC ID number of contributing federal political committee.

**C** C00447565

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  
06 / 12 / 2014

Transaction ID : SA11C.6212

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**

**C.**

Mailing Address 208 S. AKARD STREET  
SUITE 2701

City	State	Zip Code
DALLAS	TX	75202

FEC ID number of contributing federal political committee.

**C** C00109017

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  
05 / 19 / 2014

Transaction ID : SA11C.6187

Amount of Each Receipt this Period

1000.00

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

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

3000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 82 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BANK OF AMERICA CORPORATION STATE AND FEDERAL PAC**Mailing Address 1100 NORTH KING STREET,  
DE5-001-02-07

City	State	Zip Code
WILMINGTON	DE	19884

FEC ID number of contributing  
federal political committee.**C** C00043489

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

**Transaction ID : SA11C.5672**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**BILL PAC**

Mailing Address 228 S. WASHINGTON ST., STE. 115

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing  
federal political committee.**C** C00412288

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

**Transaction ID : SA11C.6213**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**BILL PAC**

Mailing Address 228 S. WASHINGTON ST., STE. 115

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing  
federal political committee.**C** C00412288

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

**Transaction ID : SA11C.6214**

Amount of Each Receipt this Period

1500.00

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

3500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BLOOMIN' BRANDS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 2202 N. WESTSHORE BLVD.

5TH FLOOR

City

TAMPA

State

FL

Zip Code

33607

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

C00253153

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  
05 / 19 / 2014D D / Y Y Y Y Y Y  
19 / 2014Y Y Y Y Y Y  
2014

Transaction ID : SA11C.5706

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

**BRADY FOR CONGRESS**

Mailing Address PO BOX 8277

City

THE WOODLANDS

State

TX

Zip Code

77387

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

C00311043

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  
05 / 29 / 2014D D / Y Y Y Y Y Y  
29 / 2014Y Y Y Y Y Y  
2014

Transaction ID : SA11C.6189

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

**BYRNE FOR CONGRESS INC**

Mailing Address PO BOX 2743

City

MOBILE

State

AL

Zip Code

36652

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

C00545673

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 29 / 2014D D / Y Y Y Y Y Y  
29 / 2014Y Y Y Y Y Y  
2014

Transaction ID : SA11C.5584

Amount of Each Receipt this Period

500.00

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

3500.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CAMPBELL PAC**

Mailing Address CAMPBELL PLACE

BOX 43

City

CAMDEN

State

NJ

Zip Code

08103

FEC ID number of contributing  
federal political committee.

C

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  
05 / 19 / 2014

Transaction ID : SA11C.5780

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CAMPBELL PAC**

Mailing Address CAMPBELL PLACE

BOX 43

City

CAMDEN

State

NJ

Zip Code

08103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 27 / 2014

Transaction ID : SA11C.5779

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**CMR POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 2485

City

SPRINGFIELD

State

VA

Zip Code

22152

FEC ID number of contributing  
federal political committee.

C C00469429

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  
06 / 30 / 2014

Transaction ID : SA11C.6216

Amount of Each Receipt this Period

2000.00

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

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

3500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**COME BACK POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address PO BOX 2485

City

SPRINGFIELD

State

VA

Zip Code

22152

FEC ID number of contributing  
federal political committee.

**C** C00400457

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  
05 / 19 / 2014

**Transaction ID : SA11C.6218**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**COMMITTEE TO ELECT CHRIS ROSS**

**B.**

Mailing Address P.O. BOX 903

City

UNIONVILLE

State

PA

Zip Code

19375

FEC ID number of contributing  
federal political committee.

**C**

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  
05 / 14 / 2014

**Transaction ID : SA11C.6136**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CONA-PAC**

**C.**

Mailing Address 110 W. LOUISIANA AVENUE  
SUITE 312

City

MIDLAND

State

TX

Zip Code

79701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 29 / 2014

**Transaction ID : SA11C.6191**

Amount of Each Receipt this Period

5000.00

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

8000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CONAWAY FOR CONGRESS**

Mailing Address PO BOX 51272

City

MIDLAND

State

TX

Zip Code

79710

FEC ID number of contributing  
federal political committee.

**C** C00383828

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 29 / 2014

Transaction ID : SA11C.6193

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)**

Mailing Address 5915 EASTMAN AVENUE  
SUITE 100

City

MIDLAND

State

MI

Zip Code

48640

FEC ID number of contributing  
federal political committee.

**C** C00350462

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 23 / 2014

Transaction ID : SA11C.5748

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**COZEN O'CONNOR POLITICAL ACTION COMMITTEE**

Mailing Address 1900 MARKET STREET

City

PHILADELPHIA

State

PA

Zip Code

19103

FEC ID number of contributing  
federal political committee.

**C** C00312777

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 23 / 2014

Transaction ID : SA11C.6138

Amount of Each Receipt this Period

1000.00

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

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**RYAN COSTELLO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>CSL BEHRING EMPLOYEES POLITICAL ACTION COMMITTEE</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>13</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	05		13		2014	
M M M	/	D D D	/	Y Y Y Y Y Y										
05		13		2014										
Mailing Address 1020 FIRST AVENUE PO BOX 61501		<b>Transaction ID : SA11C.6140</b>												
City KING OF PRUSSIA	State PA	Zip Code 19406	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>1600.00</td> </tr> </table>											1600.00
										1600.00				
FEC ID number of contributing federal political committee. <b>C</b> C00422501														
Name of Employer  		Occupation  												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>3600.00</td> </tr> </table>												3600.00
										3600.00				
<b>B.</b> Full Name (Last, First, Middle Initial) <b>CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>15</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	05		15		2014	
M M M	/	D D D	/	Y Y Y Y Y Y										
05		15		2014										
Mailing Address 601 PENNSYLVANIA AVENUE, NW SOUTH BUILDING, SUITE 600		<b>Transaction ID : SA11C.5622</b>												
City WASHINGTON	State DC	Zip Code 20004	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>5000.00</td> </tr> </table>											5000.00
										5000.00				
FEC ID number of contributing federal political committee. <b>C</b> C00007880														
Name of Employer  		Occupation  												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>5000.00</td> </tr> </table>												5000.00
										5000.00				
<b>C.</b> Full Name (Last, First, Middle Initial) <b>DENT PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	05		19		2014	
M M M	/	D D D	/	Y Y Y Y Y Y										
05		19		2014										
Mailing Address 610 S. BOULEVARD		<b>Transaction ID : SA11C.5707</b>												
City TAMPA	State FL	Zip Code 33606	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>2000.00</td> </tr> </table>											2000.00
										2000.00				
FEC ID number of contributing federal political committee. <b>C</b> C00427930														
Name of Employer  		Occupation  												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>3000.00</td> </tr> </table>												3000.00
										3000.00				
<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="10"></td> <td>8600.00</td> </tr> </table>												8600.00
										8600.00				
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="10"></td> </tr> </table>												

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

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DUANE MORRIS GOVERNMENT COMMITTEE**

Mailing Address 30 SOUTH 17TH STREET

City

PHILADELPHIA

State

PA

Zip Code

19103

FEC ID number of contributing federal political committee.

**C** C00364133

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 / 25 / 2014

Transaction ID : SA11C.6142

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**DUNCAN D. HUNTER FOR CONGRESS**

Mailing Address P.O. BOX 1545

City

EL CAJON

State

CA

Zip Code

92022

FEC ID number of contributing federal political committee.

**C** C00433524

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 / 10 / 2014

Transaction ID : SA11C.5588

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**EAST GOSHEN REPUBLICAN COMMITTEE**

Mailing Address 612 BEAUMONT CIRCLE

City

WEST CHESTER

State

PA

Zip Code

19380

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 05 / 13 / 2014

Transaction ID : SA11C.6144

Amount of Each Receipt this Period

1000.00

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

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

4500.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ELECTRICAL CONTRACTORS POLITICAL ACTION COMMITTEE****A.**

Mailing Address 3 BETHESDA METRO CENTER

SUITE 1100

City

BETHESDA

State

MD

Zip Code

20814

FEC ID number of contributing  
federal political committee.**C** C00113811

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2014

**Transaction ID : SA11C.5741**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**ELECTRICAL CONTRACTORS POLITICAL ACTION COMMITTEE****B.**

Mailing Address 3 BETHESDA METRO CENTER

SUITE 1100

City

BETHESDA

State

MD

Zip Code

20814

FEC ID number of contributing  
federal political committee.**C** C00113811

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

**Transaction ID : SA11C.5742**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**ENERGY TRANSFER EMPLOYEE MANAGEMENT COMPANY PAC (ENERGY TRANSFER PAC)****C.**

Mailing Address 400 W. 15TH ST.

SUITE 720

City

AUSTIN

State

TX

Zip Code

78701

FEC ID number of contributing  
federal political committee.**C** C00438754

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

**Transaction ID : SA11C.6195**

Amount of Each Receipt this Period

2500.00

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

7500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ENERGY TRANSFER EMPLOYEE MANAGEMENT COMPANY PAC (ENERGY TRANSFER PAC)

**A.**

Mailing Address 400 W. 15TH ST.

SUITE 720

City

AUSTIN

State

TX

Zip Code

78701

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

C00438754

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 30 2014**Transaction ID : SA11C.6196**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**EVERY REPUBLICAN IS CRUCIAL (ERICPAC)****B.**

Mailing Address 25 E MAIN STREET

SUITE 200

City

RICHMOND

State

VA

Zip Code

23219

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

C00384701

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 29 2014**Transaction ID : SA11C.6220**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)

**C.**

Mailing Address 5959 LAS COLINAS BLVD

City

IRVING

State

TX

Zip Code

75039

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

C00121368

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 13 2014**Transaction ID : SA11C.6198**

Amount of Each Receipt this Period

5000.00

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

12500.00

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

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

Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)

**A.**

Mailing Address 5959 LAS COLINAS BLVD

City

IRVING

State

TX

Zip Code

75039

FEC ID number of contributing  
federal political committee.

**C** C00121368

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : SA11C.6199**

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

**FAMILY PAC**

Mailing Address 1001 LIBERTY AVENUE  
SUITE 850

City

PITTSBURGH

State

PA

Zip Code

15222

FEC ID number of contributing  
federal political committee.

**C** C00336842

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 13 / 2014

**Transaction ID : SA11C.6146**

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

FEDERAL BIPARTISAN VOLUNTARY PUBLIC AFFAIRS COMMITTEE OF THE PNC FINANCIAL SERVICES GROUP,

Mailing Address 249 FIFTH AVE., 21ST FLOOR

City

PITTSBURGH

State

PA

Zip Code

15222

FEC ID number of contributing  
federal political committee.

**C** C00186064

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 06 / 2014

**Transaction ID : SA11C.6168**

Amount of Each Receipt this Period

1000.00

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

8000.00

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

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

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**RYAN COSTELLO FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**FITZPATRICK COSTELLO VICTORY FUND**

Mailing Address 2470 DANIELLS BRIDGE RD  
 STE 121

City State Zip Code  
 ATHENS GA 30606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

11163.98

Date of Receipt

M M / D D / Y Y Y Y  
 06 30 2014

Transaction ID : SA11C.5711

Amount of Each Receipt this Period

11163.98

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

Mailing Address PO BOX 185

City State Zip Code  
 LANGHORNE PA 19047

FEC ID number of contributing  
federal political committee.

C C00475103

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 27 2014

Transaction ID : SA11C.6148

Amount of Each Receipt this Period

2500.00

EXCESS TO BE REFUNDED

C. Full Name (Last, First, Middle Initial)  
**FREEDOM AND SECURITY PAC**

Mailing Address 228 S. WASHINGTON ST., STE. 115

City State Zip Code  
 ALEXANDRIA VA 22314

FEC ID number of contributing  
federal political committee.

C C00437061

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  
 05 29 2014

Transaction ID : SA11C.6222

Amount of Each Receipt this Period

1000.00

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

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

14663.98

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FREE MARKETS PAC INC**

Mailing Address PO BOX 11207

City

CHARLOTTE

State

NC

Zip Code

28220

FEC ID number of contributing  
federal political committee.

**C** C00527531

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 18 / 2014

**Transaction ID : SA11C.5758**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**FRIENDS OF JOE PITTS**

Mailing Address PO BOX 775

City

UNIONVILLE

State

PA

Zip Code

19375

FEC ID number of contributing  
federal political committee.

**C** C00310136

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

**Transaction ID : SA11C.6150**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**FRIENDS OF JOE PITTS**

Mailing Address PO BOX 775

City

UNIONVILLE

State

PA

Zip Code

19375

FEC ID number of contributing  
federal political committee.

**C** C00310136

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : SA11C.6151**

Amount of Each Receipt this Period

1000.00

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

4000.00

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

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FRIENDS OF JOHN BOEHNER**

A.

 Mailing Address 7908 CINCINNATI DAYTON ROAD  
 SUITE I

City	State	Zip Code
WEST CHESTER	OH	45069

FEC ID number of contributing federal political committee.

☒ C00237198

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

 2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11C.5788

Amount of Each Receipt this Period

 2000.00

Full Name (Last, First, Middle Initial)

**FRIENDS OF JOHN BOEHNER**

B.

 Mailing Address 7908 CINCINNATI DAYTON ROAD  
 SUITE I

City	State	Zip Code
WEST CHESTER	OH	45069

FEC ID number of contributing federal political committee.

☒ C00237198

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

 4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

Transaction ID : SA11C.5789

Amount of Each Receipt this Period

 2000.00

Full Name (Last, First, Middle Initial)

**FRIENDS OF SAM JOHNSON**

C.

Mailing Address P.O. BOX 860096

City	State	Zip Code
PLANO	TX	75086

FEC ID number of contributing federal political committee.

☒ C00250720

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

 1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		23		2014

Transaction ID : SA11C.6201

Amount of Each Receipt this Period

 1000.00

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

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

 5000.00

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

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. GHC ANCILLARY CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 101 EAST STATE STREET

City	State	Zip Code
KENNETT SQUARE	PA	19348

FEC ID number of contributing federal political committee.

**C** C00292094

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

Transaction ID : SA11C.6153

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. GOP GENERATION Y FUND**

Mailing Address PO BOX 9055

City	State	Zip Code
PEORIA	IL	61612

FEC ID number of contributing federal political committee.

**C** C00448191

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  
06 / 18 / 2014

Transaction ID : SA11C.5723

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. GREATER TOMORROW POLITICAL ACTION COMMITTEE**

Mailing Address 600 PENNSYLVANIA AVENUE SE STE 330

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing federal political committee.

**C** C00526715

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 29 / 2014

Transaction ID : SA11C.5626

Amount of Each Receipt this Period

2600.00

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

8600.00

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

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

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 GROCERY MANUFACTURERS ASSOCIATION POLITICAL ACTION COMMITTEE ('GMA PAC')

**A.** Mailing Address 1350 EYE STREET  
 SUITE 300

City State Zip Code  
 WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00250068

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  
 05 16 2014

Transaction ID : SA11C.5628

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**HIGHMARK PAC OF HIGHMARK INC.**

Mailing Address 1800 CENTER STREET

City State Zip Code  
 CAMP HILL PA 17089

FEC ID number of contributing  
federal political committee.

**C** C00302844

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  
 05 30 2014

Transaction ID : SA11C.6155

Amount of Each Receipt this Period

1000.00

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

Mailing Address PO BOX 5053

City State Zip Code  
 CONCORD NC 28027

FEC ID number of contributing  
federal political committee.

**C** C00504522

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  
 05 29 2014

Transaction ID : SA11C.5760

Amount of Each Receipt this Period

1000.00

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

3000.00

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





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

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

A.

Mailing Address 1501 K STREET NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C C00084491

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  
05 / 08 / 2014

Transaction ID : SA11C.5624

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

IPAA WILDCATTERS FUND

Mailing Address 1201 15TH STREET, NW  
SUITE 300

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C C00246306

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  
06 / 30 / 2014

Transaction ID : SA11C.5632

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

ISSA PAC

Mailing Address 30151 TOMAS

City

RANCHO SANTA MARGARITA

State

CA

Zip Code

92688

FEC ID number of contributing  
federal political committee.

C

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  
05 / 29 / 2014

Transaction ID : SA11C.5590

Amount of Each Receipt this Period

1000.00

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

8000.00

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

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

 Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JIM GERLACH FOR CONGRESS COMMITTEE**
**A.**

Mailing Address PO BOX 87

City

UWCHLAND

State

PA

Zip Code

19480

 FEC ID number of contributing  
 federal political committee.

**C**

C00372102

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

**Transaction ID : SA11C.6159**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**JIM GERLACH FOR CONGRESS COMMITTEE**
**B.**

Mailing Address PO BOX 87

City

UWCHLAND

State

PA

Zip Code

19480

 FEC ID number of contributing  
 federal political committee.

**C**

C00372102

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

**Transaction ID : SA11C.6160**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**JOHN S FUND**
**C.**

Mailing Address PO BOX 853

City

EDWARDSVILLE

State

IL

Zip Code

62025

 FEC ID number of contributing  
 federal political committee.

**C**

C00390831

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

**Transaction ID : SA11C.5725**

Amount of Each Receipt this Period

1000.00

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

5000.00

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

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**RYAN COSTELLO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KCKESSON CORPORATION EMPLOYEES POLITICAL FUND**

Mailing Address **1 POST STREET**  
**34TH FLOOR**

City State Zip Code  
**SAN FRANCISCO CA 94104**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**5000.00**

Date of Receipt

**05 / 15 / 2014**

**Transaction ID : SA11C.5592**

Amount of Each Receipt this Period

**5000.00**

**B.** Full Name (Last, First, Middle Initial)  
**LEAD YOUR NATION NOW PAC (LYNN PAC)**

Mailing Address **P.O. BOX 1872**

City State Zip Code  
**TOPEKA KS 66601**

FEC ID number of contributing  
federal political committee.

**C C00491043**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**1000.00**

Date of Receipt

**05 / 29 / 2014**

**Transaction ID : SA11C.5735**

Amount of Each Receipt this Period

**1000.00**

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

Mailing Address **PO BOX 53866**

City State Zip Code  
**LUBBOCK TX 79453**

FEC ID number of contributing  
federal political committee.

**C C00446625**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**1000.00**

Date of Receipt

**05 / 29 / 2014**

**Transaction ID : SA11C.6203**

Amount of Each Receipt this Period

**1000.00**

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

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

**7000.00**

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LUKE MESSER FOR CONGRESS**

Mailing Address P.O. BOX 917

City

SHELBYVILLE

State

IN

Zip Code

46176

FEC ID number of contributing  
federal political committee.**C** C00460667

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

Transaction ID : SA11C.5731

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MAJORITY COMMITTEE PAC--MC PAC**

Mailing Address P.O. BOX 10134

City

BAKERSFIELD

State

CA

Zip Code

93389

FEC ID number of contributing  
federal political committee.**C** C00428052

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		26		2014

Transaction ID : SA11C.5594

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**MCDONALDS CORPORATION POLITICAL ACTION COMMITTEE**Mailing Address 2111 MCDONALDS DR  
DEPT 213

City

OAK BROOK

State

IL

Zip Code

60523

FEC ID number of contributing  
federal political committee.**C** C00063164

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

Transaction ID : SA11C.5727

Amount of Each Receipt this Period

5000.00

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

10500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MEADOWS FOR CONGRESS**

A.

Mailing Address PO BOX 811

City

HENDERSONVILLE

State

NC

Zip Code

28793

FEC ID number of contributing  
federal political committee.

C

C00503094

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2014

Transaction ID : SA11C.5762

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

**MERCK & CO., INC., EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)**

Mailing Address 601 PENNSYLVANIA AVE., NW  
NORTH BUILDING, SUITE 1200

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C

C00097485

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11C.5634

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

**MERCK & CO., INC., EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)**

Mailing Address 601 PENNSYLVANIA AVE., NW  
NORTH BUILDING, SUITE 1200

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C

C00097485

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11C.5635

Amount of Each Receipt this Period

2500.00

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

4000.00

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

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

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MORE CONSERVATIVES PAC (MCPAC)**

Mailing Address 228 S WASHINGTON ST STE 115

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

C00540187

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2014

Transaction ID : SA11C.6224

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

**MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MORPAC)**

Mailing Address 1919 M STREET, NW  
5TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

C00004812

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

Transaction ID : SA11C.5637

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION COMMITTEE**

Mailing Address 1600 DUKE STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

C00126763

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11C.6226

Amount of Each Receipt this Period

1500.00

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

5000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF HOME BUILDERS**

A.

Mailing Address 1201 15TH ST NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing federal political committee.

**C** C30001366

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : SA11C.5639

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC. POLITICAL ACTION COMMITTEE**

B.

Mailing Address 1875 I STREET, NW  
SUITE 600

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing federal political committee.

**C** C00303339

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		27		2014

Transaction ID : SA11C.5641

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**NATIONAL BEER WHOLESALERS ASSOCIATION**

C.

Mailing Address 1101 KING STREET  
SUITE 600

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		15		2014

Transaction ID : SA11C.6229

Amount of Each Receipt this Period

5000.00

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

11000.00

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



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

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE**

A.

Mailing Address 1101 KING STREET

SUITE 600

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing federal political committee.

**C** C00144766

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2014

Transaction ID : SA11C.6228

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**NATIONAL RESTAURANT ASSOCIATION PAC (RESTAURANT PAC)**

B.

Mailing Address 2055 L STREET, NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing federal political committee.

**C** C00003764

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2014

Transaction ID : SA11C.5643

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**NATIONAL RESTAURANT ASSOCIATION PAC (RESTAURANT PAC)**

C.

Mailing Address 2055 L STREET, NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing federal political committee.

**C** C00003764

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2014

Transaction ID : SA11C.5644

Amount of Each Receipt this Period

2500.00

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

7500.00

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

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC**

Mailing Address 1605 KING STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing federal political committee.

**C** C00089458

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		19		2014

Transaction ID : SA11C.6232

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC**

Mailing Address 1605 KING STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing federal political committee.

**C** C00089458

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
06		30		2014

Transaction ID : SA11C.6233

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**NEW PAC**

Mailing Address P.O. BOX 7480

City

VISALIA

State

CA

Zip Code

93290

FEC ID number of contributing federal political committee.

**C** C00398750

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		29		2014

Transaction ID : SA11C.5596

Amount of Each Receipt this Period

3000.00

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

8000.00

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

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

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(check only one)

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<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)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NEW PIONEERS PAC**

Mailing Address 228 S WASHINGTON ST STE 115

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

**C** C00459123

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 29 / 2014

**Transaction ID : SA11C.6230**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**NFIB SAFE TRUST**

Mailing Address 1201 F STREET, NW  
SUITE 200

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

**Transaction ID : SA11C.5646**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**NISOURCE INC. PAC**

Mailing Address 200 CIVIC CENTER DRIVE

City

COLUMBUS

State

OH

Zip Code

43215

FEC ID number of contributing  
federal political committee.

**C** C00051979

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 06 / 2014

**Transaction ID : SA11C.5791**

Amount of Each Receipt this Period

1000.00

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

6000.00

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

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

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**RYAN COSTELLO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PAT MEEHAN FOR CONGRESS**

Mailing Address 50 S. PROVIDENCE ROAD

City	State	Zip Code
MEDIA	PA	19063

FEC ID number of contributing federal political committee.

**C** C00466870

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2014

Transaction ID : SA11C.6162

Amount of Each Receipt this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
**PENSKE TRUCK LEASING CO LP POLITICAL ACTION COMMITTEE**

Mailing Address ROUTE 10-GREEN HILLS  
 PO BOX 563

City	State	Zip Code
READING	PA	19603

FEC ID number of contributing federal political committee.

**C** C00373217

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2014

Transaction ID : SA11C.6164

Amount of Each Receipt this Period

2500.00

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

Mailing Address 7804 EVENING LANE

City	State	Zip Code
ALEXANDRIA	VA	22306

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 M	/	D D D	/	Y Y Y Y Y Y
05		29		2014

Transaction ID : SA11C.6235

Amount of Each Receipt this Period

2000.00

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

6500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 109 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PH&S FEDERAL PAC**

Mailing Address 3000 TWO LOGAN SQUARE

18TH & ARCH STREETS

City

PHILADELPHIA

State

PA

Zip Code

19103

FEC ID number of contributing  
federal political committee.

**C** C00279927

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 03 / 2014

Transaction ID : SA11C.6166

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE (PCMA PAC)

Mailing Address 601 PENNSYLVANIA AVENUE NW STE 740

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C** C00388819

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 02 / 2014

Transaction ID : SA11C.5648

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**POLITICAL ACTION COMMITTEE OF AAOS**

Mailing Address 317 MASSACHUSETTS AVENUE NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 14 / 2014

Transaction ID : SA11C.5652

Amount of Each Receipt this Period

5000.00

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

10250.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 110 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**POLITICAL ACTION COMMITTEE OF AAOS****A.**

Mailing Address 317 MASSACHUSETTS AVENUE NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

**Transaction ID : SA11C.5650**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**POLITICAL ACTION COMMITTEE OF AAOS****B.**

Mailing Address 317 MASSACHUSETTS AVENUE NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2014

**Transaction ID : SA11C.5651**

Amount of Each Receipt this Period

4000.00

Full Name (Last, First, Middle Initial)

**PROSPERITY ACTION INC.****C.**

Mailing Address 1006 PENDLETON STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

C00377689

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

**Transaction ID : SA11C.6239**

Amount of Each Receipt this Period

5000.00

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

10000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 111 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**REALTOR POLITICAL ACTION COMMITTEE**

Mailing Address 430 NORTH MICHIGAN AVENUE

City

CHICAGO

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		09		2014

Transaction ID : SA11C.5729

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**REPUBLICAN FEDERAL COMMITTEE OF PENNSYLVANIA**

Mailing Address 112 STATE STREET

City

HARRISBURG

State

PA

Zip Code

17101

FEC ID number of contributing  
federal political committee.

C C00044842

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		09		2014

Transaction ID : SA11C.6170

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**REPUBLICAN MAINSTREET PARTNERSHIP PAC**Mailing Address C/O G&W 2201 WISCONSIN AVE., NW  
SUITE 320

City

WASHINGTON

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C C00165159

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		09		2014

Transaction ID : SA11C.5654

Amount of Each Receipt this Period

5000.00

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

10250.00

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

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

FOR LINE NUMBER:

PAGE 112 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**REPUBLICAN OPERATION TO SECURE AND KEEP A MAJORITY (ROSKAM PAC)**

A.

Mailing Address P. O. BOX 1011

City

WHEATON

State

IL

Zip Code

60187

FEC ID number of contributing federal political committee.

**C** C00451294

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2014

Transaction ID : SA11C.5709

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

**SANOI US SERVICES INC EMPLOYEES PAC**

Mailing Address 55 CORPORATE DRIVE

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11C.5783

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

**SANOI US SERVICES INC EMPLOYEES PAC**

Mailing Address 55 CORPORATE DRIVE

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11C.5782

Amount of Each Receipt this Period

1000.00

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

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

8500.00



FOR LINE NUMBER:  
(check only one)

Diagram showing the arrangement of 15 numbered blocks in a row. The blocks are arranged in two rows. The top row has four blocks labeled 11a, 11b, 11c, and 11d. The bottom row has five blocks labeled 12, 13a, 13b, 14, and 15. Block 11c is marked with a large X.

NAME OF COMMITTEE (In Full)  
RYAN COSTELLO FOR CONGRESS

FEC Schedule A (Form 3) (Revised 02/2009)

# **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)

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<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)  
**RYAN COSTELLO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>THE FREEDOM PROJECT</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		19		2014
M M	/	D D	/	Y Y Y Y									
05		19		2014									
Mailing Address 320 FIRST STREET SE		<b>Transaction ID : SA11C.5656</b>											
City WASHINGTON	State DC	Zip Code 20003											
FEC ID number of contributing federal political committee. <b>C</b> C00305805		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>5000.00</td> </tr> </table>						5000.00					
				5000.00									
Name of Employer  		Occupation  											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>5000.00</td> </tr> </table>						5000.00					
				5000.00									

  

<b>B.</b> Full Name (Last, First, Middle Initial) <b>THE FREEDOM PROJECT</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		29		2014
M M	/	D D	/	Y Y Y Y									
05		29		2014									
Mailing Address 320 FIRST STREET SE		<b>Transaction ID : SA11C.5657</b>											
City WASHINGTON	State DC	Zip Code 20003											
FEC ID number of contributing federal political committee. <b>C</b> C00305805		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>5000.00</td> </tr> </table>						5000.00					
				5000.00									
Name of Employer  		Occupation  											
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>10000.00</td> </tr> </table>						10000.00					
				10000.00									

  

<b>C.</b> Full Name (Last, First, Middle Initial) <b>THE GLAXOSMITHKLINE PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>20</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		20		2014
M M	/	D D	/	Y Y Y Y									
05		20		2014									
Mailing Address FIVE MOORE DRIVE		<b>Transaction ID : SA11C.5764</b>											
City RESEARCH TRIANGLE PARK	State NC	Zip Code 27709											
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>1000.00</td> </tr> </table>						1000.00					
				1000.00									
Name of Employer  		Occupation  											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>1000.00</td> </tr> </table>						1000.00					
				1000.00									

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="4"></td> <td>11000.00</td> </tr> </table>						11000.00
				11000.00				
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="4"></td> <td></td> </tr> </table>						

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THE GLAXOSMITHKLINE PAC****A.**

Mailing Address FIVE MOORE DRIVE

City

RESEARCH TRIANGLE PARK

State

NC

Zip Code

27709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

**Transaction ID : SA11C.5765**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**THE GOOD FUND****B.**

Mailing Address P.O. BOX 3404

City

ALEXANDRIA

State

VA

Zip Code

22302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2014

**Transaction ID : SA11C.6243**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**THE GOOD FUND****C.**

Mailing Address P.O. BOX 3404

City

ALEXANDRIA

State

VA

Zip Code

22302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2014

**Transaction ID : SA11C.6244**

Amount of Each Receipt this Period

1000.00

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

4500.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**TIPAC**

A.

Mailing Address 1828 L STREET

N.W. SUITE 705

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

Transaction ID : SA11C.5659

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**TRALAPAC (TRUCK RENTING AND LEASING ASSOCIATION PAC)**

B.

Mailing Address 675 N WASHINGTON STREET

SUITE 410

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing federal political committee.

C

C00499400

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11C.5663

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**TRALAPAC (TRUCK RENTING AND LEASING ASSOCIATION PAC)**

C.

Mailing Address 675 N WASHINGTON STREET

SUITE 410

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing federal political committee.

C

C00499400

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11C.6246

Amount of Each Receipt this Period

1000.00

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

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

4500.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 118 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB (VERIZON PAC)**

**A.**

Mailing Address 1300 I ST NW, STE 400 WEST

ATTN: TAYLOR CRAIG

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00186288

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : SA11C.5665**

Amount of Each Receipt this Period

4000.00

Full Name (Last, First, Middle Initial)

**VOICE FOR FREEDOM**

**B.**

Mailing Address 2700 CUMBERLAND PARKWAY, SUITE 150

City

ATLANTA

State

GA

Zip Code

30339

FEC ID number of contributing  
federal political committee.

**C** C00409805

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 29 / 2014

**Transaction ID : SA11C.5715**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**VOICE OF HOUSING, HOME BUILDER ASSOCIATION OF CHESTER AND DELAWARE**

**C.**

Mailing Address 1502 MCDANIEL DRIVE

City

WEST CHESTER

State

PA

Zip Code

19380

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

**Transaction ID : SA11C.6172**

Amount of Each Receipt this Period

250.00

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

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

6250.00

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

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

FOR LINE NUMBER:

PAGE 119 OF 158

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WAWA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address C/O ELKO &amp; ASSOCIATES, LTD

2 W. BALTIMORE AVENUE, SUITE 210

City	State	Zip Code
MEDIA	PA	19063

FEC ID number of contributing federal political committee.

☐ C00148510

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

☐ 1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		11		2014

Transaction ID : SA11C.5582

Amount of Each Receipt this Period

☐ 500.00

Full Name (Last, First, Middle Initial)

**WEDGE PAC DBA MARSHA PAC**

Mailing Address P.O. BOX 680063

City	State	Zip Code
FRANKLIN	TN	37068

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 M	/	D D D	/	Y Y Y Y Y
06		02		2014

Transaction ID : SA11C.6185

Amount of Each Receipt this Period

☐ 2000.00

Full Name (Last, First, Middle Initial)

**WESTMORELAND FOR CONGRESS**

Mailing Address P.O. BOX 458

City	State	Zip Code
SHARPSBURG	GA	30277

FEC ID number of contributing federal political committee.

☐ C00387126

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

☐ 1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

Transaction ID : SA11C.5717

Amount of Each Receipt this Period

☐ 1000.00

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

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

☐ 3500.00

☐

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 120 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WESTON PAC**

Mailing Address 1001 CONNECTICUT AVE N.W.  
SUITE 1200

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		29		2014

Transaction ID : SA11C.5667

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**WOMACK FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 508

City	State	Zip Code
ROGERS	AR	72757

FEC ID number of contributing federal political committee.

**C** C00477745

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
05		29		2014

Transaction ID : SA11C.5586

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**YOUNG GUNS DAY I 2014**

Mailing Address 228 S WASHINGTON ST STE 115

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing federal political committee.

**C** C00563635

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

10375.91

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11C.6209

Amount of Each Receipt this Period

10375.91

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

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

12375.91

323989.89



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 121 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. 121 N. WALNUT ASSOCIATES, LP**Mailing Address 55 COUNTRY CLUB DR  
SUITE 200

City DOWNINGTON State PA Zip Code 19335

Purpose of Disbursement  
RENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB17.5496

**B. 121 N. WALNUT ASSOCIATES, LP**Mailing Address 55 COUNTRY CLUB DR  
SUITE 200

City DOWNINGTON State PA Zip Code 19335

Purpose of Disbursement  
RENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB17.5548

**C. AMTRAK**

Mailing Address 50 MASSACHUSETTS AVE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

48.00
-------

Transaction ID : SB17.5439

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

4048.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 122 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMTRAK**

Mailing Address 50 MASSACHUSETTS AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2014

City	State	Zip Code
WASHINGTON	DC	20002

Purpose of Disbursement  
TRAVEL: RAIL

Amount of Each Disbursement this Period

69.00
-------

Transaction ID : SB17.5440

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. AMTRAK**

Mailing Address 50 MASSACHUSETTS AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

City	State	Zip Code
WASHINGTON	DC	20002

Purpose of Disbursement  
TRAVEL: RAIL

Amount of Each Disbursement this Period

197.00
--------

Transaction ID : SB17.5443

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)

**C. AMTRAK**

Mailing Address 50 MASSACHUSETTS AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2014

City	State	Zip Code
WASHINGTON	DC	20002

Purpose of Disbursement  
TRAVEL: RAIL

Amount of Each Disbursement this Period

25.00
-------

Transaction ID : SB17.5446

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:

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

291.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 124 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMTRAK**

Mailing Address 50 MASSACHUSETTS AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

City	State	Zip Code
WASHINGTON	DC	20002

Purpose of Disbursement  
TRAVEL: RAIL

Amount of Each Disbursement this Period

48.00
-------

Transaction ID : SB17.5450

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. AMTRAK**

Mailing Address 50 MASSACHUSETTS AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

City	State	Zip Code
WASHINGTON	DC	20002

Purpose of Disbursement  
TRAVEL: RAIL

Amount of Each Disbursement this Period

167.00
--------

Transaction ID : SB17.5451

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. AMTRAK**

Mailing Address 50 MASSACHUSETTS AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

City	State	Zip Code
WASHINGTON	DC	20002

Purpose of Disbursement  
TRAVEL: RAIL

Amount of Each Disbursement this Period

69.00
-------

Transaction ID : SB17.5454

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

284.00



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 126 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BEST BUY**

Mailing Address AIROPORT SQUARE

City	State	Zip Code
NORTH WALES	PA	19454

Purpose of Disbursement  
HIBBS: OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

139.99
--------

Transaction ID : SB17.5550

**[MEMO ITEM]****B. ROBERT BOLLAND**

Mailing Address 620 THORNCROFT DRIVE

City	State	Zip Code
WEST CHESTER	PA	19380

Purpose of Disbursement  
INKIND: PAYROLL SERVICES/TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : SB17.6250

**C. ROBERT BOLLAND**

Mailing Address 620 THORNCROFT DRIVE

City	State	Zip Code
WEST CHESTER	PA	19380

Purpose of Disbursement  
IN-KIND: PAYROLL SERVICES/TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : SB17.6252

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

400.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 127 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BURGER KING**Mailing Address **BOWMANVILLE SERVICE PLAZA**  
**PA TURN**City **BOWMANVILLE** State **PA** Zip Code **17507**Purpose of Disbursement  
**TOWEY: TRAVEL: FOOD**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

7.41
------

Transaction ID : **SB17.5528****[MEMO ITEM]****B. MATT CATANIA**Mailing Address **154 DAVENPORT RD**City **KENNETT SQUARE** State **PA** Zip Code **19348**Purpose of Disbursement  
**PAYROLL**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

464.18
--------

Transaction ID : **SB17.5492****C. MATT CATANIA**Mailing Address **154 DAVENPORT RD**City **KENNETT SQUARE** State **PA** Zip Code **19348**Purpose of Disbursement  
**PAYROLL**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

1023.64
---------

Transaction ID : **SB17.5560****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1487.82

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 128 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. COMCAST**

Mailing Address 701 JOHN F KENNEDY BLVD

City	State	Zip Code
PHILADELPHIA	PA	19103

Purpose of Disbursement  
BROADBAND SERVICES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

135.26
--------

Transaction ID : SB17.5497

**B. MARIA DIESEL**

Mailing Address 1533 JOHNNYS WAY

City	State	Zip Code
WEST CHESTER	PA	19382

Purpose of Disbursement  
FIELD CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

Amount of Each Disbursement this Period

1188.00
---------

Transaction ID : SB17.5534

**C. MARIA DIESEL**

Mailing Address 1533 JOHNNYS WAY

City	State	Zip Code
WEST CHESTER	PA	19382

Purpose of Disbursement  
REIMBURSEMENTS: SEE MEMO ENTRIES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

Amount of Each Disbursement this Period

31.00
-------

Transaction ID : SB17.5538

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

1354.26



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 129 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MARIA DIESEL**

Mailing Address 1533 JOHNNYS WAY

City	State	Zip Code
WEST CHESTER	PA	19382

Purpose of Disbursement  
TRAVEL: MILEAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

Amount of Each Disbursement this Period

64.00
-------

Transaction ID : SB17.5539

**B. MARIA DIESEL**

Mailing Address 1533 JOHNNYS WAY

City	State	Zip Code
WEST CHESTER	PA	19382

Purpose of Disbursement  
FIELD CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

Amount of Each Disbursement this Period

2944.00
---------

Transaction ID : SB17.5554

**C. MARIA DIESEL**

Mailing Address 1533 JOHNNYS WAY

City	State	Zip Code
WEST CHESTER	PA	19382

Purpose of Disbursement  
FIELD CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

Amount of Each Disbursement this Period

5897.00
---------

Transaction ID : SB17.5555

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

8905.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 130 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FEDEX**Mailing Address 3875 AIRWAYS  
MODULE H3 DEPARTMENT 4634City State Zip Code  
MEMPHIS TN 38116Purpose of Disbursement  
DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2014

Amount of Each Disbursement this Period

37.52
-------

Transaction ID : SB17.5568

**B. FLS CONNECT**Mailing Address 7300 HUDSON BLVD.  
STE 270City State Zip Code  
ST. PAUL MN 55128Purpose of Disbursement  
DIRECT MAIL PRINTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2014

Amount of Each Disbursement this Period

2425.00
---------

Transaction ID : SB17.5481

**C. FLS CONNECT**Mailing Address 7300 HUDSON BLVD.  
STE 270City State Zip Code  
ST. PAUL MN 55128Purpose of Disbursement  
DIRECT MAIL PRINTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2014

Amount of Each Disbursement this Period

691.04
--------

Transaction ID : SB17.5482

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

3153.56

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WILLIAM HIBBS**

Mailing Address 1420 CAMBRIDGE DR

City	State	Zip Code
NORTH WALES	PA	19454

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

970.77
--------

Transaction ID : SB17.5518

**B. WILLIAM HIBBS**

Mailing Address 1420 CAMBRIDGE DR

City	State	Zip Code
NORTH WALES	PA	19454

Purpose of Disbursement  
TRAVEL: MILEAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

237.44
--------

Transaction ID : SB17.5542

**C. WILLIAM HIBBS**

Mailing Address 1420 CAMBRIDGE DR

City	State	Zip Code
NORTH WALES	PA	19454

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

1335.82
---------

Transaction ID : SB17.5543

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

2544.03

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WILLIAM HIBBS**

Mailing Address 1420 CAMBRIDGE DR

City	State	Zip Code
NORTH WALES	PA	19454

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

145.79
--------

Transaction ID : SB17.5547

**B. HOTELS.COM**

Mailing Address 10440 N. CENTRAL EXPWY.,STE. 400

City	State	Zip Code
DALLAS	TX	75231

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2014

Amount of Each Disbursement this Period

248.09
--------

Transaction ID : SB17.5571

**C. INTERNAL REVENUE SERVICE**

Mailing Address 111 CONSTITUTION AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20024

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2014

Amount of Each Disbursement this Period

602.52
--------

Transaction ID : SB17.5441

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

996.40

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. INTERNAL REVENUE SERVICE**

Mailing Address 111 CONSTITUTION AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20024

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

3607.23
---------

Transaction ID : SB17.5444

**B. INTERNAL REVENUE SERVICE**

Mailing Address 111 CONSTITUTION AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20024

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2014

Amount of Each Disbursement this Period

353.99
--------

Transaction ID : SB17.5445

**C. INTERNAL REVENUE SERVICE**

Mailing Address 111 CONSTITUTION AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20024

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

3998.73
---------

Transaction ID : SB17.5457

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

7959.95

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. JIVE COMMUNICATIONS**Mailing Address 1275 WEST 1600 NORTH  
SUITE 102

City OREM State UT Zip Code 94057

Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

Amount of Each Disbursement this Period

94.29
-------

Transaction ID : SB17.5572

**B. JIVE COMMUNICATIONS**Mailing Address 1275 WEST 1600 NORTH  
SUITE 102

City OREM State UT Zip Code 94057

Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2014

Amount of Each Disbursement this Period

246.86
--------

Transaction ID : SB17.5573

**C. JIVE COMMUNICATIONS**Mailing Address 1275 WEST 1600 NORTH  
SUITE 102

City OREM State UT Zip Code 94057

Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2014

Amount of Each Disbursement this Period

178.30
--------

Transaction ID : SB17.5574

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

519.45

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. KEYSTONE HEALTH PLAN EAST**

Mailing Address PO BOX 11855

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement  
TOWEY: INSURANCE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

227.27
--------

Transaction ID : SB17.5488

**[MEMO ITEM]****B. KEYSTONE HEALTH PLAN EAST**

Mailing Address PO BOX 11855

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement  
TOWEY: INSURANCE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

227.27
--------

Transaction ID : SB17.5489

**[MEMO ITEM]****C. LEBANON COUNTY REPUBLICAN COMMITTEE**

Mailing Address 21 SOUTH NINTH STREET

City	State	Zip Code
LEBANON	PA	17042

Purpose of Disbursement  
EVENT REGISTRATION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		07		2014

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.5505

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

400.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LN CONSULTING LLC**

Mailing Address 121 STATE ST

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

2500.00
---------

Transaction ID : SB17.5499

**B. LN CONSULTING LLC**

Mailing Address 121 STATE ST

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		07		2014

Amount of Each Disbursement this Period

7500.00
---------

Transaction ID : SB17.5506

**C. MERCURY**Mailing Address 250 GREENWICH ST  
36TH FLOOR

City	State	Zip Code
NEW YORK	NY	10007

Purpose of Disbursement  
STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

5000.00
---------

Transaction ID : SB17.5490

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

15000.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MIDTOWN GARAGE**

Mailing Address 1415 SANSOM STREET

City	State	Zip Code
PHILADELPHIA	PA	19103

Purpose of Disbursement  
DIESEL: PARKING SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

Amount of Each Disbursement this Period

31.00
-------

Transaction ID : SB17.5541

**[MEMO ITEM]****B. PA DEPARTMENT OF REVENUE**

Mailing Address PO BOX 280904

City	State	Zip Code
HARRISBURG	PA	17128

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

Amount of Each Disbursement this Period

391.45
--------

Transaction ID : SB17.5566

**C. PA DEPARTMENT OF REVENUE**

Mailing Address PO BOX 280904

City	State	Zip Code
HARRISBURG	PA	17128

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

Amount of Each Disbursement this Period

31.60
-------

Transaction ID : SB17.5567

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

423.05

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PATHFINDER COMMUNICATIONS, LLC**Mailing Address 603 SWEDESFORD RD  
SWEDESFORD CORPORATE CENTER

City MALVERN State PA Zip Code 19355

Purpose of Disbursement  
STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2014

Amount of Each Disbursement this Period

1575.00
---------

Transaction ID : SB17.5515

**B. PATHFINDER COMMUNICATIONS, LLC**Mailing Address 603 SWEDESFORD RD  
SWEDESFORD CORPORATE CENTER

City MALVERN State PA Zip Code 19355

Purpose of Disbursement  
STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2014

Amount of Each Disbursement this Period

910.00
--------

Transaction ID : SB17.5516

**C. PENNSYLVANIA TURNPIKE COMMISSION**

Mailing Address PO BOX 67676

City HARRISBURG State PA Zip Code 17106

Purpose of Disbursement  
TOWEY: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

5.54
------

Transaction ID : SB17.5526

[MEMO ITEM]

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

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

2485.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RED CURVE SOLUTIONS**

Mailing Address 138 CONANT STREET

City	State	Zip Code
BEVERLY	MA	01915

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		31		2014

Amount of Each Disbursement this Period

2400.00
---------

Transaction ID : SB17.5467

**B. RENNICK A REMLEY**

Mailing Address 119 1/2 S 18TH STREET

City	State	Zip Code
PITTSBURGH	PA	15203

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

1320.50
---------

Transaction ID : SB17.5495

**C. RENNICK A REMLEY**

Mailing Address 119 1/2 S 18TH STREET

City	State	Zip Code
PITTSBURGH	PA	15203

Purpose of Disbursement  
REIMBURSEMENTS: SEE MEMO ENTRIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

149.40
--------

Transaction ID : SB17.5522

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

3869.90

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RENNICK A REMLEY**

Mailing Address 119 1/2 S 18TH STREET

City	State	Zip Code
PITTSBURGH	PA	15203

Purpose of Disbursement  
TRAVEL: MILEAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

20.38
-------

Transaction ID : SB17.5523

**B. RENNICK A REMLEY**

Mailing Address 119 1/2 S 18TH STREET

City	State	Zip Code
PITTSBURGH	PA	15203

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

1326.50
---------

Transaction ID : SB17.5524

**C. RENNICK A REMLEY**

Mailing Address 119 1/2 S 18TH STREET

City	State	Zip Code
PITTSBURGH	PA	15203

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

1326.50
---------

Transaction ID : SB17.5546

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

2673.38

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 141 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RENNICK A REMLEY**

Mailing Address 119 1/2 S 18TH STREET

City	State	Zip Code
PITTSBURGH	PA	15203

Purpose of Disbursement  
REIMBURSEMENTS: SEE MEMO ENTRIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

110.88
--------

Transaction ID : SB17.5562

**B. RENNICK A REMLEY**

Mailing Address 119 1/2 S 18TH STREET

City	State	Zip Code
PITTSBURGH	PA	15203

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

1326.50
---------

Transaction ID : SB17.5563

**C. RENNICK A REMLEY**

Mailing Address 119 1/2 S 18TH STREET

City	State	Zip Code
PITTSBURGH	PA	15203

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

2114.69
---------

Transaction ID : SB17.5564

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

3552.07

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RUTH CHRIS STEAK HOUSE**

Mailing Address 220 N GULPH RD

City	State	Zip Code
KING OF PRUSSIA	PA	19406

Purpose of Disbursement  
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2014

Amount of Each Disbursement this Period

1994.92
---------

Transaction ID : SB17.5501

**B. SHERATON GREAT VALLEY HOTEL**

Mailing Address 707 LANCASTER AVE

City	State	Zip Code
FRAZER	PA	19355

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2014

Amount of Each Disbursement this Period

800.00
--------

Transaction ID : SB17.5503

**C. SHERATON GREAT VALLEY HOTEL**

Mailing Address 707 LANCASTER AVE

City	State	Zip Code
FRAZER	PA	19355

Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2014

Amount of Each Disbursement this Period

183.57
--------

Transaction ID : SB17.5514

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

2978.49

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SPRINT**

Mailing Address PO BOX 4191

City	State	Zip Code
CAROL STREAM	IL	60197

Purpose of Disbursement  
REMLEY: MOBILE PHONE EXPENSE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

149.40
--------

Transaction ID : SB17.5464

**[MEMO ITEM]****B. SPRINT**

Mailing Address PO BOX 4191

City	State	Zip Code
CAROL STREAM	IL	60197

Purpose of Disbursement  
REMLEY: MOBILE PHONE EXPENSE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

110.88
--------

Transaction ID : SB17.5465

**[MEMO ITEM]****C. STAPLES**

Mailing Address 500 STAPLES DRIVE

City	State	Zip Code
FRAMINGHAM	MA	01702

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2014

Amount of Each Disbursement this Period

73.13
-------

Transaction ID : SB17.5466

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

73.13
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. STAPLES**

Mailing Address 500 STAPLES DRIVE

City	State	Zip Code
FRAMINGHAM	MA	01702

Purpose of Disbursement  
TOWEY: OFFICE SUPPLIES

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 15 / 2014

Amount of Each Disbursement this Period

13.77
-------

Transaction ID : SB17.5529

**[MEMO ITEM]****B. STAPLES**

Mailing Address 500 STAPLES DRIVE

City	State	Zip Code
FRAMINGHAM	MA	01702

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 03 / 2014

Amount of Each Disbursement this Period

29.98
-------

Transaction ID : SB17.5468

**C. STAPLES**

Mailing Address 500 STAPLES DRIVE

City	State	Zip Code
FRAMINGHAM	MA	01702

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 09 / 2014

Amount of Each Disbursement this Period

458.46
--------

Transaction ID : SB17.5469

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

488.44



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. STAPLES**

Mailing Address 500 STAPLES DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

City	State	Zip Code
FRAMINGHAM	MA	01702

Amount of Each Disbursement this Period

22.25
-------

Purpose of Disbursement  
OFFICE SUPPLIESCategory/  
Type

Transaction ID : SB17.5470

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. STAPLES**

Mailing Address 500 STAPLES DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2014

City	State	Zip Code
FRAMINGHAM	MA	01702

Amount of Each Disbursement this Period

31.79
-------

Purpose of Disbursement  
OFFICE SUPPLIESCategory/  
Type

Transaction ID : SB17.5471

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. STONEWALL**

Mailing Address PO BOX 330

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

City	State	Zip Code
ELVERSON	PA	19520

Amount of Each Disbursement this Period

668.88
--------

Purpose of Disbursement  
FACILITY RENTAL/CATERING SERVICESCategory/  
Type

Transaction ID : SB17.5553

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

722.92

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 146 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. THE PROSPER GROUP**Mailing Address 435 EAST MAIN STREET  
SUITE 250

City GREENWOOD State IA Zip Code 46143

Purpose of Disbursement  
STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

102.50
--------

Transaction ID : SB17.5463

**B. THE TARRANCE GROUP**Mailing Address ATTN: STUART C. VICKERY  
201 N. UNION ST, SUITE 410

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
RESEARCH CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

Amount of Each Disbursement this Period

11938.00
----------

Transaction ID : SB17.5576

**C. THE THEODORE COMPANY LLC**

Mailing Address PO BOX 320412

City ALEXANDRIA State VA Zip Code 22320

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		09		2014

Amount of Each Disbursement this Period

9774.00
---------

Transaction ID : SB17.5577

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

21814.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. THE UNION LEAGUE**

Mailing Address 140 S BROAD ST

City	State	Zip Code
PHILADELPHIA	PA	19102

Purpose of Disbursement  
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 23 / 2014

Amount of Each Disbursement this Period

1161.65
---------

Transaction ID : SB17.5537

**B. TODD KRICK GRAPHIC DESIGN**

Mailing Address 131 CLOVER LANE

City	State	Zip Code
PALMYRA	PA	17078

Purpose of Disbursement  
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 07 / 2014

Amount of Each Disbursement this Period

198.22
--------

Transaction ID : SB17.5509

**C. TODD KRICK GRAPHIC DESIGN**

Mailing Address 131 CLOVER LANE

City	State	Zip Code
PALMYRA	PA	17078

Purpose of Disbursement  
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 10 / 2014

Amount of Each Disbursement this Period

32.71
-------

Transaction ID : SB17.5510

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

1392.58

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TODD KRICK GRAPHIC DESIGN**

Mailing Address 131 CLOVER LANE

City	State	Zip Code
PALMYRA	PA	17078

Purpose of Disbursement  
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2014

Amount of Each Disbursement this Period

68.90
-------

Transaction ID : SB17.5530

**B. TODD KRICK GRAPHIC DESIGN**

Mailing Address 131 CLOVER LANE

City	State	Zip Code
PALMYRA	PA	17078

Purpose of Disbursement  
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2014

Amount of Each Disbursement this Period

177.98
--------

Transaction ID : SB17.5531

**C. TODD KRICK GRAPHIC DESIGN**

Mailing Address 131 CLOVER LANE

City	State	Zip Code
PALMYRA	PA	17078

Purpose of Disbursement  
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2014

Amount of Each Disbursement this Period

563.50
--------

Transaction ID : SB17.5532

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

810.38

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TODD KRICK GRAPHIC DESIGN**

Mailing Address 131 CLOVER LANE

City	State	Zip Code
PALMYRA	PA	17078

Purpose of Disbursement  
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 22 / 2014

Amount of Each Disbursement this Period

645.28
--------

Transaction ID : SB17.5535

**B. PETER TOWEY**

Mailing Address 86 CONESTOGA ROAD

City	State	Zip Code
DEVON	PA	19333

Purpose of Disbursement  
TRAVEL: MILEAGE

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 01 / 2014

Amount of Each Disbursement this Period

298.95
--------

Transaction ID : SB17.5493

**C. PETER TOWEY**

Mailing Address 86 CONESTOGA ROAD

City	State	Zip Code
DEVON	PA	19333

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 01 / 2014

Amount of Each Disbursement this Period

2556.45
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Transaction ID : SB17.5494

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

3500.68

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PETER TOWEY**

Mailing Address 86 CONESTOGA ROAD

City	State	Zip Code
DEVON	PA	19333

Purpose of Disbursement  
REIMBURSEMENTS: SEE MEMO ENTRIES

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 15 / 2014

Amount of Each Disbursement this Period

382.05
--------

Transaction ID : SB17.5519

**B. PETER TOWEY**

Mailing Address 86 CONESTOGA ROAD

City	State	Zip Code
DEVON	PA	19333

Purpose of Disbursement  
TRAVEL: MILEAGE

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 15 / 2014

Amount of Each Disbursement this Period

95.76
-------

Transaction ID : SB17.5520

**C. PETER TOWEY**

Mailing Address 86 CONESTOGA ROAD

City	State	Zip Code
DEVON	PA	19333

Purpose of Disbursement  
PAYROLL

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 15 / 2014

Amount of Each Disbursement this Period

2564.45
---------

Transaction ID : SB17.5521

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

3042.26

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PETER TOWEY**

Mailing Address 86 CONESTOGA ROAD

City	State	Zip Code
DEVON	PA	19333

Purpose of Disbursement  
REIMBURSEMENTS: SEE MEMO ENTRIES

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

227.27
--------

Transaction ID : SB17.5544

**B. PETER TOWEY**

Mailing Address 86 CONESTOGA ROAD

City	State	Zip Code
DEVON	PA	19333

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

2564.45
---------

Transaction ID : SB17.5545

**C. PETER TOWEY**

Mailing Address 86 CONESTOGA ROAD

City	State	Zip Code
DEVON	PA	19333

Purpose of Disbursement  
REIMBURSEMENTS: SEE MEMO ENTRIES

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2014

Amount of Each Disbursement this Period

128.06
--------

Transaction ID : SB17.5556

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

2919.78

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PETER TOWEY**

Mailing Address 86 CONESTOGA ROAD

City	State	Zip Code
DEVON	PA	19333

Purpose of Disbursement  
TRAVEL: MILEAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 12 / 2014

Amount of Each Disbursement this Period

14.56
-------

Transaction ID : SB17.5557

**B. PETER TOWEY**

Mailing Address 86 CONESTOGA ROAD

City	State	Zip Code
DEVON	PA	19333

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 13 / 2014

Amount of Each Disbursement this Period

2564.45
---------

Transaction ID : SB17.5561

**C. TRANSAXT**

Mailing Address 190 MONROE AVE NW

City	State	Zip Code
GRAND RAPIDS	MI	49503

Purpose of Disbursement  
MERCHANT FEES

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 01 / 2014

Amount of Each Disbursement this Period

119.24
--------

Transaction ID : SB17.5472

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

2698.25



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 153 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TRANSAXT**

Mailing Address 190 MONROE AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

City	State	Zip Code
GRAND RAPIDS	MI	49503

Amount of Each Disbursement this Period

470.24
--------

Purpose of Disbursement  
MERCHANT FEESCategory/  
Type

Transaction ID : SB17.5473

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. TRANSAXT**

Mailing Address 190 MONROE AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2014

City	State	Zip Code
GRAND RAPIDS	MI	49503

Amount of Each Disbursement this Period

150.74
--------

Purpose of Disbursement  
MERCHANT FEESCategory/  
Type

Transaction ID : SB17.5474

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)

**C. TRANSAXT**

Mailing Address 190 MONROE AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

City	State	Zip Code
GRAND RAPIDS	MI	49503

Amount of Each Disbursement this Period

414.00
--------

Purpose of Disbursement  
MERCHANT FEESCategory/  
Type

Transaction ID : SB17.5475

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

1034.98

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TRANSAXT**

Mailing Address 190 MONROE AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

City	State	Zip Code
GRAND RAPIDS	MI	49503

Amount of Each Disbursement this Period

2.24
------

Purpose of Disbursement  
MERCHANT FEESCategory/  
Type**Transaction ID : SB17.5476**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**B. TRANSAXT**

Mailing Address 190 MONROE AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

City	State	Zip Code
GRAND RAPIDS	MI	49503

Amount of Each Disbursement this Period

121.50
--------

Purpose of Disbursement  
MERCHANT FEESCategory/  
Type**Transaction ID : SB17.5477**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**C. TRANSAXT**

Mailing Address 190 MONROE AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2014

City	State	Zip Code
GRAND RAPIDS	MI	49503

Amount of Each Disbursement this Period

56.24
-------

Purpose of Disbursement  
MERCHANT FEESCategory/  
Type**Transaction ID : SB17.5478**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

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

179.98

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TRANSAXT**

Mailing Address 190 MONROE AVE NW

City	State	Zip Code
GRAND RAPIDS	MI	49503

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 20 / 2014

Amount of Each Disbursement this Period

72.00
-------

Transaction ID : SB17.5479

**B. TRANSAXT**

Mailing Address 190 MONROE AVE NW

City	State	Zip Code
GRAND RAPIDS	MI	49503

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 26 / 2014

Amount of Each Disbursement this Period

94.48
-------

Transaction ID : SB17.5480

**c. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City	State	Zip Code
WASHINGTON	DC	20260

Purpose of Disbursement  
POSTAGE

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:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 06 / 2014

Amount of Each Disbursement this Period

98.00
-------

Transaction ID : SB17.5442

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

264.48

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 156 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

City	State	Zip Code
WASHINGTON	DC	20260

Purpose of Disbursement  
HIBBS: POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

5.80
------

Transaction ID : SB17.5551

**[MEMO ITEM]****B. USPS**

Full Name (Last, First, Middle Initial)

Mailing Address 475 L'ENFANT PLAZA SW

City	State	Zip Code
WASHINGTON	DC	20260

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

49.00
-------

Transaction ID : SB17.5452

**c. USPS**

Full Name (Last, First, Middle Initial)

Mailing Address 475 L'ENFANT PLAZA SW

City	State	Zip Code
WASHINGTON	DC	20260

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

Amount of Each Disbursement this Period

245.00
--------

Transaction ID : SB17.5453

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

294.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

City	State	Zip Code
WASHINGTON	DC	20260

Purpose of Disbursement  
POSTAGE

Amount of Each Disbursement this Period

147.00
--------

Transaction ID : SB17.5455

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 475 L'ENFANT PLAZA SW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

City	State	Zip Code
WASHINGTON	DC	20260

Purpose of Disbursement  
POSTAGE

Amount of Each Disbursement this Period

46.00
-------

Transaction ID : SB17.5458

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. VERIZON WIRELESS**

Mailing Address PO BOX 11328

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

City	State	Zip Code
ST. PETERSBURG	FL	33733

Purpose of Disbursement  
TOWEY: MOBILE PHONE EXPENSE

Amount of Each Disbursement this Period

128.06
--------

Transaction ID : SB17.5437

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:

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

193.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 158 OF 158

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

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NAME OF COMMITTEE (In Full)

**RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. VERIZON WIRELESS**

Mailing Address PO BOX 11328

City	State	Zip Code
ST. PETERSBURG	FL	33733

Purpose of Disbursement  
TOWEY: MOBILE PHONE EXPENSE

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2014

Amount of Each Disbursement this Period

128.06
--------

Transaction ID : SB17.5438

**[MEMO ITEM]****B.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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

0.00
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103464.72
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