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FEC FORM 3

FE5AN018

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Authorize	ed Committee	Office	e Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
Cormick Lynch for C	ongress			
				1
ADDRESS (number and street)	PO Box 709			
Check if different than previously reported. (ACC)	Newport		RI 02840)
2. FEC IDENTIFICATION	NUMBER ▼C	CITY	STATE A	ZIP CODE
C C00563197	3. IS RE	THIS X NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (a) Quarterly Reports: April 15 Quarter	(b) 12-I	Day PRE -Election Report for the Primary (12P) Convention (12C)	: General (12G) Special (12S)	Runoff (12R)
July 15 Quarter X October 15 Qua		ection on	/ Y = Y = Y	in the State of
January 31 Yea	r-End Report (YE) (c) 30-I	Day POST -Election Report for th	ie:	
		General (30G)	Runoff (30R)	Special (30S)
Termination Rep	` ′	ection on	/	in the State of
5. Covering Period	M M / D D / Y Y 2014		9 30 / Y	Y Y Y 2014
I certify that I have examined Type or Print Name of Treas		of my knowledge and belief it is	true, correct and con	nplete.
	Richard Springer	[Electronically Filed]	Date 10	15 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
NOTE: Submission of false, er	roneous, or incomplete informat	tion may subject the person signin	g this Report to the pe	nalties of 2 U.S.C. §437g.
Office Use Only				EC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements FEC Form 3 (Revised 02/2003)

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Write or Type Committee Name

Cormick	Lynch for	or Congress
---------	-----------	-------------

09 30 2014 21 2014 Report Covering the Period: From: To: **COLUMN B COLUMN A Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 3795.00 13715.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 3795.00 13715.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 2048.11 6904.97 (from Line 17) (b) Total Offsets to Operating 0.00 35.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 2048.11 6869.97 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 7095.03 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 2052.10 Schedule C and/or Schedule D).....

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 10

Write or Type Committee Name

Cormick Lynch for Congress

80 21 2014 09 30 2014 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
I1. CON	ITRIBUTIONS (other than loans) FROM:		
()	Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	2050.00	10000.00
	(ii) Unitemized	1745.00	3615.00
	(iii) TOTAL of contributions from individuals	3795.00	13615.00
	Political Party Committees	0.00	0.00
` '	Other Political Committees (such as PACs)	0.00	100.00
(e)	The Candidate TOTAL CONTRIBUTIONS	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	3795.00	13715.00
	NSFERS FROM OTHER HORIZED COMMITTEES	0.00	0.00
3. LOAI			
	Made or Guaranteed by the Candidate	0.00	250.00
` '	All Other Loans	0.00	0.00
` '	TOTAL LOANS (add Lines 13(a) and (b))	0.00	250.00
	SETS TO OPERATING ENDITURES		
(Refu	unds, Rebates, etc.)	0.00	35.00
	ER RECEIPTS dends, Interest, etc.)	0.00	0.00
11(e)	AL RECEIPTS (add Lines 1, 12, 13(c), 14, and 15) 2 Total to Line 24, page 4)	3795.00	14000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

ments PAGE 4 / 10

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	2048.11	6904.97
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	2048.11	6904.97
	III. CASH SI	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	5348.14
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	3795.00
25.	SUBTOTAL (add Line 23 and Line 24)		9143.14
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	2048.11
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)	IG PERIOD	7095.03

SCHEDULE A (FEC Form 3)

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

10

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 13a 13b 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) Cormick Lynch for Congress Full Name (Last, First, Middle Initial) **Deborah Burns** Date of Receipt Mailing Address 40 Deer Ridge Way 2014 24 City State Zip Code Transaction ID: SA11AI.4276 RΙ 02879 Wakefield FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Information Requested Information Requested Receipt For: 2014 Election Cycle-to-Date Primary X General 500.00 Other (specify) Full Name (Last, First, Middle Initial) James Downing Date of Receipt Mailing Address 42 Hollyhock Drive 30 2014 City State Zip Code Transaction ID: SA11AI.4313 Cranston RΙ 02920 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation Information Requested Information Requested Receipt For: 2014 Election Cycle-to-Date Primary Meneral Control 300.00 Other (specify) Full Name (Last, First, Middle Initial) Daniel Harrop Date of Receipt Mailing Address P.O. Box 603364 2014 30 City State Zip Code Transaction ID: SA11AI.4315 RΙ Providence 02906 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Information Requested Information Requested Receipt For: 2014 Election Cycle-to-Date Primary X General 1000.00 Other (specify) 1800.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: [PAGE	:	ь	OF	10	
(ched	(check only one)								
×	11a		11b		11c		11	d	_
	12		13a		13b		14		15

Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pene name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Cormick Lynch for Congress		
Full Name (Last, First, Middle Initial) Jonathan Pardee Mailing Address 540 Bellevue Avenue City Newport FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: 2014 Primary General	State Zip Code RI 02840 C Occupation Information Requested Election Cycle-to-Date	Date of Receipt 99 28 2014 Transaction ID : SA11AI.4351 Amount of Each Receipt this Period 250.00
Other (specify) Full Name (Last, First, Middle Initial) Mailing Address	250.00	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General	State Zip Code C Occupation Election Cycle-to-Date	Amount of Each Receipt this Period
Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City	State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	Occupation Election Cycle-to-Date	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		250.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (In Full)

Facebook, Inc.

Purpose of Disbursement

City

City

Cranston

Printing

Candidate Name

Office Sought:

Menlo Park

Advertising

Candidate Name

Office Sought:

Kel-Print, Inc.

Purpose of Disbursement

Full Name (Last, First, Middle Initial)

Mailing Address 1601 Willow Road

House Senate

House Senate

District:

District:

President

District: Full Name (Last, First, Middle Initial)

Mailing Address 969 Park Avenue

President

PAGE 10 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 19b 18 19a Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. Cormick Lynch for Congress Date of Disbursement 2014 09 02 State Zip Code Amount of Each Disbursement this Period CA 94025 320.00 004 Transaction ID: SB17.4319 Category/ Type Disbursement For: 2014 Primary General Other (specify) Date of Disbursement 80 21 2014 State Zip Code Amount of Each Disbursement this Period RΙ 02910 586.63 001 Transaction ID: SB17.4260 Category/ Type Disbursement For: 2014 Primary General Other (specify) Date of Disbursement 09 2014 State Zip Code Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

c. Kiley Lynch

State:

Mailing Address 157A Prospect Hill Street City 02810 Newport RΙ Purpose of Disbursement Advertising 004 Candidate Name Category/ Type Office Sought: Disbursement For: 2014 House

500.00 Transaction ID : SB17.4270

X General Primary Senate President Other (specify)

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

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

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-	÷	-5		-5			-	÷

State:

	lage# 143/0320/42				
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS		Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 8 OF 10 (check only one) X 17
	ny information copied from such Reports and Star for commercial purposes, other than using the r				
\rangle	NAME OF COMMITTEE (In Full) Cormick Lynch for Congress				
۹.	Full Name (Last, First, Middle Initial) Rhode Island Republican Party				Date of Disbursement
	Mailing Address 3551 Post Road				09 10 2014
	City Warwick	State RI	Zip Code 02886		Amount of Each Disbursement this Period
	Purpose of Disbursement Program Expense			001	225.00 Transaction ID : SB17.4320
	Candidate Name			Category/ Type	
	Senate President	Primary Other (s	X General		
	State: District: Full Name (Last, First, Middle Initial)				
3.	Mailing Address				Date of Disbursement
	City	State	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement				
	Candidate Name			Category/ Type	
	Office Sought: Senate President State: Disburs Senate President	Primary Other (s	General		
	Full Name (Last, First, Middle Initial)				
Э.					Date of Disbursement
	Mailing Address				M M / D D / Y Y Y
	City Sta	ite Zip	p Code		Amount of Each Disbursement this Period
	Purpose of Disbursement				
	Candidate Name			Category/ Type	
	Office Sought: House Disburs Senate President	Primary Other (s	General		
	State: District:				

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

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

225.00

1631.63

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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	13h

10

OF

Detailed Summary Page Transaction ID: SC/10.4224 NAME OF COMMITTEE (In Full) Cormick Lynch for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Cormick Lynch General Mailing Address Other (specify) \blacktriangledown PO Box 709 City State ZIP Code RΙ 02840 Newport Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 250.00 0.00 250.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D31 ^M 03^M ž014 0.00 ONDEMAND % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 250.00 TOTALS This Period (last page in this line only) 250.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)

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

FOR LINE NUMBER: (check only one)

PAGE

	9
X	10

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10 OF

Cormick Lynch for Congress

A. Full Name (Last, First, Middle Initial) of Debtor	<u> </u>	Nature of Debt (Purpose):		
Campaign Financial Services	of Creditor	Compliance Consulting		
Campaign i mancial Cervices				
Mailing Address PO Box 30844				
City State	Zip Code			
Bethesda	MD 20824			
Outstanding Balance Beginning This Period		Transaction ID : SD10.4130		
625.00				
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period		
0.00	0.00	625.00		
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):		
Campaign Financial Services		Compliance Consulting		
Mailing Address PO Box 30844				
City State	Zip Code			
Bethesda	MD 20824			
Outstanding Balance Beginning This Period 1177.10		Transaction ID : SD10.4132		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period		
0.00	0.00	1177.10		
C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Nature of Debt (Purpose):		
Mailing Address		_		
City	State Zip Code			
Outstanding Balance Beginning This Period				
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period		
		1		
7 7	7 7 7			
SUBTOTALS This Period This Page (optional)	,	1802.10		
COSTOTALO TAIS FERIOU TIRS Fage (optiolial)				
TOTALS This Period (last page this line number	only)	1802.10		
TOTAL OUTSTANDING LOANS from Schedule (C (last page only)	250.00		
ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page only)	2052.10		
_,, ca, .cata to appropriate		7		