

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
Erin McClelland for Congress, Inc.

ADDRESS (number and street) 918 Carlisle Street
 Check if different than previously reported. (ACC) Natrona Heights PA 15065

2. **FEC IDENTIFICATION NUMBER** C C00543918 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
PA 12

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 through M M / D D / Y Y Y Y
10 / 01 / 2015 through 12 / 31 / 2015

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 Douglas Campbell
Signature of Treasurer Douglas Campbell *[Electronically Filed]* Date M M / D D / Y Y Y Y
01 / 31 / 2016

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Erin McClelland for Congress, Inc.

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	43449.77	89985.13
(b) Total Contribution Refunds (from Line 20(d))	0.00	360.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	43449.77	89625.13
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	17415.33	56256.42
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	209.60
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	17415.33	56046.82
8. Cash on Hand at Close of Reporting Period (from Line 27)	58376.68	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	5400.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Erin McClelland for Congress, Inc.

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

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).....	36254.86	71204.86
(ii) Unitemized	2718.93	9304.29
(iii) TOTAL of contributions from individuals	38973.79	80509.15
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	3150.00	8150.00
(d) The Candidate	1325.98	1325.98
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	43449.77	89985.13
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	209.60
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).....	43449.77	90194.73

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	17415.33	56256.42
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	360.00
(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	360.00
21. OTHER DISBURSEMENTS	0.00	1025.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	17415.33	57641.42

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	32342.24
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	43449.77
25. SUBTOTAL (add Line 23 and Line 24).....	75792.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17415.33
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	58376.68

**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 5 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Alan Adams

Mailing Address 470 Long Pond Rd
Ste 200

City Rochester State NY Zip Code 14612-3057

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

Name of Employer Adams Mortgage Capital Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : VN8M5E78Q33

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
James R. Aiello

Mailing Address 253 Sleepy Hollow Rd

City Pittsburgh State PA Zip Code 15216-1713

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

Name of Employer JRA Development Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2015

Transaction ID : VN8M5E78Q41

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Javaid M Alvi

Mailing Address 600 Munir Dr

City Elizabeth State PA Zip Code 15037-9533

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

Name of Employer GeoMechanics, Inc Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : VN8M5E5Y3R3

Amount of Each Receipt this Period
 1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
James D Amato

Mailing Address 601 Broad St

City State Zip Code
Sewickley PA 15143-1709

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

Name of Employer Occupation
Damian Amato and Start Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 14 / 2015

Transaction ID : VN8M5E78Q25

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Dennis L Astorino

Mailing Address 1117 Tall Trees Dr

City State Zip Code
Pittsburgh PA 15241-3532

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

Name of Employer Occupation
DLA Architecture Manager Member

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 14 / 2015

Transaction ID : VN8M5E5Y3J5

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Baden Plaza Co., LP

Mailing Address 428 Blvd Of The Allies
Ste 100

City State Zip Code
Pittsburgh PA 15219-1314

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 14 / 2015

Transaction ID : VN8M5E7E437

Amount of Each Receipt this Period
1500.00

PARTNERSHIP--partners below if itemized

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

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
William G West Jr

Mailing Address 428 Blvd Of The Allies

City Pittsburgh State PA Zip Code 15219-1314

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

Name of Employer Castlebrook Development Occupation CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : VN8M5E7M4Q3

Amount of Each Receipt this Period
1500.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Kathleen Belacastro

Mailing Address 232 Princeton Dr

City Aliquippa State PA Zip Code 15001-1553

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

Name of Employer Self Occupation Realtor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : VN8M5E5Y3H7

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Nancy Bernstein

Mailing Address 1425 Wightman St

City Pittsburgh State PA Zip Code 15217-1240

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : VN8M5E6GGS1

Amount of Each Receipt this Period
1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Chuck J. Betters II

Mailing Address 3468 Brodhead Rd

City State Zip Code
Monaca PA 15061-3149

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

Name of Employer Occupation
C.J. BETTERS ENTERPRISES OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 04 / 2015

Transaction ID : VN8M5E7YMZ8

Amount of Each Receipt this Period
250.00

* In-Kind: ticket to Roxan Betters Albanese Foundation Event

B. Full Name (Last, First, Middle Initial)
Vera Bonnett

Mailing Address 2056 Ambrose Rd

City State Zip Code
Marion Center PA 15759-6721

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

Name of Employer Occupation
retired retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 02 / 2015

Transaction ID : VN8M5E585D7

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
David C Brown

Mailing Address 227 1st St

City State Zip Code
Aspinwall PA 15215-3008

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

Name of Employer Occupation
Rosen Louik and Perry Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 03 / 2015

Transaction ID : VN8M5E58MW7

Amount of Each Receipt this Period
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
John Burkoff

Mailing Address 3900 Forbes Ave

City Pittsburgh State PA Zip Code 15260-6900

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

Name of Employer UNIVERSITY OF PITTSBURGH Occupation LAW PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2015

Transaction ID : VN8M5E2RN15

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Sara D Buss

Mailing Address 1296 Denniston St

City Pittsburgh State PA Zip Code 15217-1329

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

Name of Employer Campbell and Levine Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : VN8M5E5Y3E4

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Shelley B. Campbell

Mailing Address 730 Fairview Rd

City Pittsburgh State PA Zip Code 15238-1704

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

Name of Employer Campbell & Levine, LLC Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2015

Transaction ID : VN8M5E32KA1

Amount of Each Receipt this Period
2700.00

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Suzanne Caplan

Mailing Address 2926 Espy Ave

City	State	Zip Code
Pittsburgh	PA	15216-2017

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

Name of Employer	Occupation
Self	Writer/consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : VN8M5E6HK99

Amount of Each Receipt this Period
 _____ 100.00

B. Full Name (Last, First, Middle Initial)
Neil Capretto

Mailing Address 440 2nd St

City	State	Zip Code
Beaver	PA	15009-2718

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

Name of Employer	Occupation
Gateway Rehab	Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 10 / 2015

Transaction ID : VN8M5E5S7B0

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
William R Caroselli

Mailing Address 20 Stanwix St
 FI 7

City	State	Zip Code
Pittsburgh	PA	15222-4802

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

Name of Employer	Occupation
Self	Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2015

Transaction ID : VN8M5E78Q82

Amount of Each Receipt this Period
 _____ 250.00

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

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

_____ 600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
George I. Clendaniel Jr.

Mailing Address 2664 Quail Hill Dr

City State Zip Code
Pittsburgh PA 15241-2963

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

Name of Employer Occupation
Management Engineering Corp. President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : VN8M5E5Y3N9

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
J. Kent Culley

Mailing Address 89 Seldom Seen Rd

City State Zip Code
Bradfordwoods PA 15015-1321

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

Name of Employer Occupation
Tucker Arensberg attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : VN8M5E78PJ9

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Vincent C Deluzio

Mailing Address 100 Kenyon Rd

City State Zip Code
Pittsburgh PA 15205-1719

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

Name of Employer Occupation
R & V Associates Managing Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : VN8M5E5Y3M1

Amount of Each Receipt this Period
2700.00

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

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

3450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Bonnie V. Dicarlo

Mailing Address 6327 Jackson St

City State Zip Code
Pittsburgh PA 15206-2231

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

Name of Employer Occupation
Self Financial Planner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 22 / 2015

Transaction ID : VN8M5E7HJZ3

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Patrick ` Gallagher

Mailing Address 19 Oak Knoll Dr

City State Zip Code
Sewickley PA 15143-9703

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

Name of Employer Occupation
PGT Trucking President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 14 / 2015

Transaction ID : VN8M5E5Y3D6

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Cynthia Gerber

Mailing Address 340 Fox Hunt Rd

City State Zip Code
Pittsburgh PA 15238-1187

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 02 / 2015

Transaction ID : VN8M5E581P9

Amount of Each Receipt this Period
1000.00

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

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

1600.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 13 OF 44

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Jonathan Glance

Mailing Address 94 Pilgrim St

City State Zip Code
 Carnegie PA 15106-1022

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

Name of Employer Occupation
 Glance & Associates Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 25 2015

Transaction ID : VN8M5E78PR6

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Grandview Square, LP

Mailing Address 141 Oak Manor Dr

City State Zip Code
 Natrona Heights PA 15065-1949

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 30 2015

Transaction ID : VN8M5E78PP0

Amount of Each Receipt this Period
 1000.00

PARTNERSHIP--partners below if itemized

C. Full Name (Last, First, Middle Initial)
Brian Clark

Mailing Address 141 Oak Manor Dr

City State Zip Code
 Natrona Heights PA 15065-1949

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

Name of Employer Occupation
 Brian D. Clark and Associates Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 30 2015

Transaction ID : VN8M5E7WTM1

Amount of Each Receipt this Period
 1000.00

[MEMO ITEM]

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 14 OF 44
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Fred E Kraybill

Mailing Address 7211 Thomas Blvd

City State Zip Code
Pittsburgh PA 15208-2506

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

Name of Employer Occupation
HJ Heinz Progressive Care Center Registered Nurse

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : VN8M5E78QB6

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
David J Laffey

Mailing Address 10 S 14th St
Apt B

City State Zip Code
Pittsburgh PA 15203-1521

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

Name of Employer Occupation
Castlebrook Development Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : VN8M5E78Q74

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Peter P. Leone Jr.

Mailing Address 218 Eton Rd

City State Zip Code
Pittsburgh PA 15205-1733

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

Name of Employer Occupation
Northwestern Mutual financial advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : VN8M5E5Y3S0

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Ann M. Logue

Mailing Address 1279 Bingay Dr

City Pittsburgh State PA Zip Code 15237-6225

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

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : VN8M5E3VAM9

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ann M. Logue

Mailing Address 1279 Bingay Dr

City Pittsburgh State PA Zip Code 15237-6225

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

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : VN8M5E57V60

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ann M. Logue

Mailing Address 1279 Bingay Dr

City Pittsburgh State PA Zip Code 15237-6225

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

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : VN8M5E6J681

Amount of Each Receipt this Period
100.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
David J Malone

Mailing Address 444 Liberty Ave
760

City Pittsburgh State PA Zip Code 15222-1220

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

Name of Employer Gateway Financial Group Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : VN8M5E51WM7

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Diane Manning

Mailing Address 3350 37th Street Ext

City Beaver Falls State PA Zip Code 15010-1156

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

Name of Employer Not Employed 42 Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : VN8M5E6FYB1

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Carole O Markus

Mailing Address 112 Cardiff Rd

City Pittsburgh State PA Zip Code 15237-2805

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

Name of Employer MARKWALT,INC Occupation CORPORATE SECRETARY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 13 / 2015

Transaction ID : VN8M5E78PG3

Amount of Each Receipt this Period
1000.00

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	FOR LINE NUMBER: (check only one)	PAGE 17 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
William Markus

Mailing Address 112 Cardiff Rd

City Pittsburgh State PA Zip Code 15237-2805

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

Name of Employer none Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 01 / 2015

Transaction ID : VN8M5E57QR3

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Joseph Massaro III

Mailing Address 108 Marvelwood Pl

City Pittsburgh State PA Zip Code 15215-1569

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

Name of Employer Owner and President Occupation Massaro Corporation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2015

Transaction ID : VN8M5E78Q09

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Steven Massaro

Mailing Address 4100 Muirfield Cir

City Presto State PA Zip Code 15142-1069

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

Name of Employer Massaro Company Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : VN8M5E78PC1

Amount of Each Receipt this Period
 500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Cynthia Nardelli

Mailing Address 1170 Harvard Rd

City Pittsburgh State PA Zip Code 15205-1731

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

Name of Employer N/A Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1654.86

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 14 / 2015

Transaction ID : VN8M5E7YMX2

Amount of Each Receipt this Period
1654.86

* In-Kind: refreshments for fundraiser

B. Full Name (Last, First, Middle Initial)
Pascal M. Nardelli

Mailing Address 1170 Harvard Rd

City Pittsburgh State PA Zip Code 15205-1731

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

Name of Employer Castlebrook Occupation **Founder**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 14 / 2015

Transaction ID : VN8M5E5Y3Y0

Amount of Each Receipt this Period
1700.00

C. Full Name (Last, First, Middle Initial)
Pascal M. Nardelli

Mailing Address 1170 Harvard Rd

City Pittsburgh State PA Zip Code 15205-1731

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

Name of Employer Castlebrook Occupation **Founder**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 14 / 2015

Transaction ID : VN8M5E7M4P5

Amount of Each Receipt this Period
1000.00

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

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

4354.86

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

Full Name (Last, First, Middle Initial) Ross Nese		Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2015
Mailing Address 100 Ashley Ct		Transaction ID : VN8M5E78PT2
City Pittsburgh	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Grane Associates	Occupation Managing Partner	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) Bob Pachavis		Date of Receipt M M / D D / Y Y Y Y Y 12 / 14 / 2015
Mailing Address 710 Trillium Ct		Transaction ID : VN8M5E5Y3P7
City Wexford	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation N/A	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Barbara R Palmer		Date of Receipt M M / D D / Y Y Y Y Y 12 / 17 / 2015
Mailing Address 425 Windmere Dr Apt 4B		Transaction ID : VN8M5E78PK6
City State College	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer NA	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 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: (check only one)	PAGE 20 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Jack B Piatt

Mailing Address 95 W Beau St
Ste 600

City Washington State PA Zip Code 15301-6827

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

Name of Employer Millcraft Investments Occupation Founder and Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 14 / 2015

Transaction ID : VN8M5E5Y406

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Nancy Rossi

Mailing Address 165 Baker Rd

City Monaca State PA Zip Code 15061-2576

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

Name of Employer Remax Occupation Select Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 14 / 2015

Transaction ID : VN8M5E5Y3K3

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Frederic B Sargent

Mailing Address 27676 Liberty Ave

City Pittsburgh State PA Zip Code 15222

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

Name of Employer Sargent Electric Co Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 08 / 2015

Transaction ID : VN8M5E78QC4

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 21 OF 44
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
RAYMOND S SCHUTZMAN

Mailing Address 111 Berwyn Road

City State Zip Code
 Pittsburgh PA 15237-2803

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

Name of Employer Occupation
 Allegheny Financial Group financial planner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 17 2015

Transaction ID : VN8M5E7JHM2

Amount of Each Receipt this Period
 100.00

* Earmarked Contribution: See Below

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

Mailing Address 14 Arrow St
 Ste 11

City State Zip Code
 Cambridge MA 02138-5106

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

Name of Employer Occupation
 Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 17 2015

Transaction ID : VN8M5E7JHM2E

Amount of Each Receipt this Period
 100.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
RAYMOND S SCHUTZMAN

Mailing Address 111 Berwyn Road

City State Zip Code
 Pittsburgh PA 15237-2803

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

Name of Employer Occupation
 Allegheny Financial Group financial planner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 30 2015

Transaction ID : VN8M5E78PM4

Amount of Each Receipt this Period
 100.00

* Earmarked Contribution: See Below

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. ActBlue

Full Name (Last, First, Middle Initial)
Mailing Address 14 Arrow St
Ste 11
City Cambridge State MA Zip Code 02138-5106

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : VN8M5E78PM4E

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. SD Civic, GP

Full Name (Last, First, Middle Initial)
Mailing Address 1 Ppg Pl
Ste 1700
City Pittsburgh State PA Zip Code 15222-5416

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : VN8M5E78PX5

Amount of Each Receipt this Period
250.00

PARTNERSHIP--partners below if itemized

C. Don A Linzer

Full Name (Last, First, Middle Initial)
Mailing Address 1 Ppg Pl
City Pittsburgh State PA Zip Code 15222-5415

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

Name of Employer Occupation
Schneider Downs Corporate President/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : VN8M5E7M4N7

Amount of Each Receipt this Period
250.00

[MEMO ITEM]

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Barry L Sebring

Mailing Address 101 Hunters Point Dr

City Greensburg State PA Zip Code 15601-8704

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

Name of Employer Sebring & Associates Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : VN8M5E78PD9

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Sarah Snider

Mailing Address 260 White Oak Dr

City New Kensington State PA Zip Code 15068-6724

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

Name of Employer Highmark Occupation Business Innovation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2015

Transaction ID : VN8M5E64607

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Ruth Stifel

Mailing Address 4109 Deer Run Rd

City Allison Park State PA Zip Code 15101-3182

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

Name of Employer University of Pittsburgh Occupation adjunct professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : VN8M5E6M3J0

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: (check only one)	PAGE 24 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
William S Tjader

Mailing Address 9123 Willoughby Rd

City Pittsburgh State PA Zip Code 15237-4519

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

Name of Employer PPG Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : VN8M5E78PE7

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Theodore M Trbovich

Mailing Address 511 Greenfield Ave

City Pittsburgh State PA Zip Code 15207-1051

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

Name of Employer Self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : VN8M5E5Y3W4

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Vincent P Tutino

Mailing Address 3031 Wilmington Rd

City New Castle State PA Zip Code 16105-1242

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

Name of Employer Lindy Paving Inc Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2015

Transaction ID : VN8M5E78Q17

Amount of Each Receipt this Period
500.00

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

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

1100.00

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

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

FOR LINE NUMBER: PAGE 25 OF 44
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Charlie Zappala

Mailing Address 91 Woodland Dr

City Pittsburgh State PA Zip Code 15228-1759

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

Name of Employer Occupation
CLT? Investor and Businessman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2015

Transaction ID : VN8M5E78PY3

Amount of Each Receipt this Period
 500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

36254.86

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 44
	<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)
Erin McClelland for Congress, Inc.

A. DEEP BLUE

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 754

City State Zip Code
Media PA 19063-0754

FEC ID number of contributing federal political committee. **C** C00455741

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2015

Transaction ID : VN8M5E78PS4

Amount of Each Receipt this Period
 150.00

B. Feldstein Grinberg Stein & McKee PAC

Full Name (Last, First, Middle Initial)
Mailing Address 428 Blvd Of The Allies

City State Zip Code
Pittsburgh PA 15219-1314

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : VN8M5E5Y3X2

Amount of Each Receipt this Period
 500.00

non federal pac contribution returned in January 2016

C. Friends for Joe Spanik

Full Name (Last, First, Middle Initial)
Mailing Address 3339 Brodhead Rd
Apt 1

City State Zip Code
Aliquippa PA 15001-1277

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : VN8M5E78Q67

Amount of Each Receipt this Period
 500.00

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 44
	<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)
Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Friends of Frank Dermody

Mailing Address **PO Box 274**

City **Tarentum** State **PA** Zip Code **15084-0274**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 20 / 2015

Transaction ID : VN8M5E7E495

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Friends of John K Weinstein

Mailing Address **395 Luann Dr**

City **Mc Kees Rocks** State **PA** Zip Code **15136-1849**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 14 / 2015

Transaction ID : VN8M5E78PW8

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
IBEW Political Action Committee

Mailing Address **900 7th St NW**

City **Washington** State **DC** Zip Code **20001-4089**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 16 / 2015

Transaction ID : VN8M5E5WCB4

Amount of Each Receipt this Period
 500.00

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

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

2000.00

3150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

Full Name (Last, First, Middle Initial) A. Erin L McClelland		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 20 / 2015	
Mailing Address 918 Carlisle St		Transaction ID : VN8M5E7YMS0	
City Natrona Hts	State PA	Zip Code 15065-1014	
FEC ID number of contributing federal political committee. C H4PA12043		Amount of Each Receipt this Period 17.00	
Name of Employer Great Lakes Behavioral	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 17.00		
		* In-Kind: parking	

Full Name (Last, First, Middle Initial) B. Erin L McClelland		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 07 / 2015	
Mailing Address 918 Carlisle St		Transaction ID : VN8M5E7YMW4	
City Natrona Hts	State PA	Zip Code 15065-1014	
FEC ID number of contributing federal political committee. C H4PA12043		Amount of Each Receipt this Period 1005.41	
Name of Employer Great Lakes Behavioral	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1022.41		
		* In-Kind: expenses related to PA Society events	

Full Name (Last, First, Middle Initial) C. Erin L McClelland		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 11 / 2015	
Mailing Address 918 Carlisle St		Transaction ID : VN8M5E7YMT8	
City Natrona Hts	State PA	Zip Code 15065-1014	
FEC ID number of contributing federal political committee. C H4PA12043		Amount of Each Receipt this Period 184.43	
Name of Employer Great Lakes Behavioral	Occupation Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1206.84		
		* In-Kind: furniture for office	

SUBTOTAL of Receipts This Page (optional).....	1206.84
TOTAL This Period (last page this line number only).....	1206.84

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

Full Name (Last, First, Middle Initial) Erin L McClelland		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 12 / 2015
Mailing Address 918 Carlisle St		Transaction ID : VN8M5E7YMR3
City Natrona Hts	State PA	
FEC ID number of contributing federal political committee. C H4PA12043		Amount of Each Receipt this Period 112.14
Name of Employer Great Lakes Behavioral	Occupation Consultant	* In-Kind: meeting expense - dinng
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1318.98	

Full Name (Last, First, Middle Initial) Erin L McClelland		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2015
Mailing Address 918 Carlisle St		Transaction ID : VN8M5E7YMP7
City Natrona Hts	State PA	
FEC ID number of contributing federal political committee. C H4PA12043		Amount of Each Receipt this Period 7.00
Name of Employer Great Lakes Behavioral	Occupation Consultant	* In-Kind: parking
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1325.98	

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

SUBTOTAL of Receipts This Page (optional).....	119.14
TOTAL This Period (last page this line number only).....	1325.98

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

Full Name (Last, First, Middle Initial) A. Adobe Creative Cloud			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 345 Park Ave			Amount of Each Disbursement this Period 74.19
City San Jose	State CA	Zip Code 95110-2704	
Purpose of Disbursement software		Category/ Type	Transaction ID : VN7MXA0NE95
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Adobe Creative Cloud			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 345 Park Ave			Amount of Each Disbursement this Period 74.19
City San Jose	State CA	Zip Code 95110-2704	
Purpose of Disbursement software		Category/ Type	Transaction ID : VN7MXA0NEA3
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Adobe Creative Cloud			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 345 Park Ave			Amount of Each Disbursement this Period 74.19
City San Jose	State CA	Zip Code 95110-2704	
Purpose of Disbursement software		Category/ Type	Transaction ID : VN7MXA0NEB1
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	222.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 44			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

Full Name (Last, First, Middle Initial) A. Chuck J. Betters II		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 3468 Brodhead Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : VN8M5E7YMZ8I
City Monaca	State PA	
Zip Code 15061-3149	Purpose of Disbursement ticket to Roxan Betters Albanese Foundation Event	* In-Kind Received
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. First Data Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address PO Box 407066		Amount of Each Disbursement this Period 44.63 Transaction ID : VN7MX9ZXQ61
City Fort Lauderdale	State FL	
Zip Code 33340-7066	Purpose of Disbursement credit card processing fees	* In-Kind Received
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. First Data Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address PO Box 407066		Amount of Each Disbursement this Period 80.07 Transaction ID : VN7MXA0NE87
City Fort Lauderdale	State FL	
Zip Code 33340-7066	Purpose of Disbursement credit card processing fees	* In-Kind Received
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	374.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 44	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

Full Name (Last, First, Middle Initial) A. First Data Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address PO Box 407066		Amount of Each Disbursement this Period 32.51
City Fort Lauderdale	State FL	
Zip Code 33340-7066	Purpose of Disbursement credit card processing fees	Transaction ID : VN7MXA0NE79
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Google, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 35.00
City Mountain View	State CA	
Zip Code 94043-1351	Purpose of Disbursement app services	Transaction ID : VN7MX9ZXQ79
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Google, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 35.00
City Mountain View	State CA	
Zip Code 94043-1351	Purpose of Disbursement app services	Transaction ID : VN7MXA0NED6
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	102.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

Full Name (Last, First, Middle Initial) A. Google, Inc.			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 1600 Amphitheatre Pkwy			Amount of Each Disbursement this Period 35.00
City Mountain View	State CA	Zip Code 94043-1351	
Purpose of Disbursement app services		Category/ Type	Transaction ID : VN7MXA0NEC9
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. Samuel B Jones			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2015
Mailing Address 3201 Kingswood Dr			Amount of Each Disbursement this Period 1250.00
City Garland	State TX	Zip Code 75040-0936	
Purpose of Disbursement consulting - fundraising		Category/ Type	Transaction ID : VN7MXA0NE45
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) c. Samuel B Jones			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 3201 Kingswood Dr			Amount of Each Disbursement this Period 1250.00
City Garland	State TX	Zip Code 75040-0936	
Purpose of Disbursement consulting - fundraising		Category/ Type	Transaction ID : VN7MXA0NE53
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	2535.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 44			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

Full Name (Last, First, Middle Initial) A. Erin L McClelland		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 918 Carlisle St		Amount of Each Disbursement this Period 17.00
City Natrona Hts	State PA	
Zip Code 15065-1014	Purpose of Disbursement parking	Transaction ID : VN8M5E7YMS0I
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) B. Erin L McClelland		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 918 Carlisle St		Amount of Each Disbursement this Period 1005.41
City Natrona Hts	State PA	
Zip Code 15065-1014	Purpose of Disbursement expenses related to PA Society events	Transaction ID : VN8M5E7YMW4I
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) C. Erin L McClelland		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address 918 Carlisle St		Amount of Each Disbursement this Period 184.43
City Natrona Hts	State PA	
Zip Code 15065-1014	Purpose of Disbursement furniture for office	Transaction ID : VN8M5E7YMT8I
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1206.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 44			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

Full Name (Last, First, Middle Initial) A. Erin L McClelland			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2015
Mailing Address 918 Carlisle St			Amount of Each Disbursement this Period 112.14
City Natrona Hts	State PA	Zip Code 15065-1014	
Purpose of Disbursement meeting expense - dinng		Candidate Name	Transaction ID : VN8M5E7YMR3I
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		* In-Kind Received	
State:	District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. Erin L McClelland			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 918 Carlisle St			Amount of Each Disbursement this Period 7.00
City Natrona Hts	State PA	Zip Code 15065-1014	
Purpose of Disbursement parking		Candidate Name	Transaction ID : VN8M5E7YMP7I
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		* In-Kind Received	
State:	District:	Category/ Type	

Full Name (Last, First, Middle Initial) c. Cynthia Nardelli			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 1170 Harvard Rd			Amount of Each Disbursement this Period 1654.86
City Pittsburgh	State PA	Zip Code 15205-1731	
Purpose of Disbursement refreshments for fundraiser		Candidate Name	Transaction ID : VN8M5E7YMX2I
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		* In-Kind Received	
State:	District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....	1774.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 44			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015		
Mailing Address 1101 15th St NW Ste 500			Amount of Each Disbursement this Period 2100.00		
City Washington	State DC	Zip Code 20005-5006	Transaction ID : VN7MXA0NE37		
Purpose of Disbursement database services		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. PNC Bank			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015		
Mailing Address 915 Freeport Rd			Amount of Each Disbursement this Period 237.03		
City Pittsburgh	State PA	Zip Code 15238-3123	Transaction ID : VN7MX9ZYZ81		
Purpose of Disbursement check printing fee		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. PNC Bank			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015		
Mailing Address 915 Freeport Rd			Amount of Each Disbursement this Period 24.00		
City Pittsburgh	State PA	Zip Code 15238-3123	Transaction ID : VN7MXA0NE61		
Purpose of Disbursement bank fee		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	2361.03
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 44	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

Full Name (Last, First, Middle Initial) A. Propel Marketing		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 108 Myrtle St		Amount of Each Disbursement this Period 12000.00
City Quincy	State MA Zip Code 02171-1753	
Purpose of Disbursement debt not owed		Transaction ID : VN7MXA0NZ77
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM] *
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Sir Harry's		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 301 Park Ave 301 Park Ave		Amount of Each Disbursement this Period 49.37
City New York	State NY Zip Code 10022-6844	
Purpose of Disbursement travel exp - dining		Transaction ID : VN7MXA0NRH0
Candidate Name		
Office Sought:	Disbursement For: 2016	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Somerset County Democratic Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015
Mailing Address PO Box 11		Amount of Each Disbursement this Period 100.00
City Somerset	State PA Zip Code 15501-0011	
Purpose of Disbursement contribution		Transaction ID : VN7MXA0NDW2
Candidate Name		
Office Sought:	Disbursement For: 2016	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	149.37
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VN7MXA0NZ77

This estimate was created by a previous staffer, who was unaware that the final contract was never signed, no services were rendered and no invoice was created. Thus the debt is voided.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

Full Name (Last, First, Middle Initial) A. Stokes, Wasser and Wheeler, LLP			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 712 Brookline Blvd Apt 2			Amount of Each Disbursement this Period 35000.00
City Pittsburgh	State PA	Zip Code 15226-2164	
Purpose of Disbursement debt zeroed		Category/ Type	Transaction ID : VN7MXA0NZ85
Candidate Name			
Office Sought:	House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State:	District:		

Full Name (Last, First, Middle Initial) B. Woodfield Group			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 1118 Old Breckenridge Ln			Amount of Each Disbursement this Period 2400.00
City Montgomery	State AL	Zip Code 36117-8961	
Purpose of Disbursement compliance consulting		Category/ Type	Transaction ID : VN7MXA0NDY8
Candidate Name			
Office Sought:	House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) C. Wyndham Midtown			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 205 E 45th St			Amount of Each Disbursement this Period 1270.00
City New York	State NY	Zip Code 10017-3301	
Purpose of Disbursement travel expense - hotel		Category/ Type	Transaction ID : VN7MXA0NEG0
Candidate Name			
Office Sought:	House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	3670.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VN7MXA0NZ85

Debt was reported by a part owner of the firm and previous campaign manager, Adam Stokes.. No contract for this amount was signed or produced by the firm. Stokes, Wasser and Wheeler, LLP and Adam Stokes have been paid in full for all services rendered.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 44	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Erin McClelland for Congress, Inc.

Full Name (Last, First, Middle Initial) A. Yellow House Consulting		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 10 Summer Street		Amount of Each Disbursement this Period 4000.00
City Dorchester	State MA	
Zip Code 02121	Purpose of Disbursement consulting - social media	Transaction ID : VN7MXA0NE04
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	16396.02

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VN8M5C2KN29L

Erin McClelland for Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2014

Erin L McClelland

Primary
 General
 Other (specify) ▼

Mailing Address
918 Carlisle St

City State ZIP Code
Natrona Hts PA 15065-1014

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
06 / 10 / 2013 none % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 5000.00
TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VN8M5C2KND6L

Erin McClelland for Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2014

Erin L McClelland

Primary

General

Other (specify) ▼

Mailing Address

918 Carlisle St

City

State

ZIP Code

Natrona Hts

PA

15065-1014

Original Amount of Loan

400.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

400.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

06

10

2013

none

none

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

400.00

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

5400.00

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)

Erin McClelland for Congress, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Propel Marketing

Mailing Address 108 Myrtle St

City State Zip Code
 Quincy MA 02171-1753

Nature of Debt (Purpose):
 website development and social media services (estimated expense)

Outstanding Balance Beginning This Period	Transaction ID : VN5PD9H9T55	
12000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	12000.00	0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Stokes, Wasser and Wheeler, LLP

Mailing Address 712 Brookline Blvd
 Apt 2

City State Zip Code
 Pittsburgh PA 15226-2164

Nature of Debt (Purpose):
 campaign management consulting

Outstanding Balance Beginning This Period	Transaction ID : VN5PD9H9T47	
35000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	35000.00	0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	