

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 Mary Ellen Balchunis for Congress

ADDRESS (number and street) PO BOX 1619 Check if different than previously reported. (ACC) Havertown PA 19083

2. FEC IDENTIFICATION NUMBER C C00560920 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT PA 07

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) X 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 ... in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on ... in the State of

5. Covering Period 07 / 01 / 2014 through 09 / 30 / 2014

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

Type or Print Name of Treasurer Judith LaLonde

Signature of Treasurer Judith LaLonde [Electronically Filed] Date 10 / 15 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Mary Ellen Balchunis for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

	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))....	41861.17	73050.23
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	41861.17	73050.23
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	40620.74	61832.93
(b) Total Offsets to Operating Expenditures (from Line 14).....	69.95	69.95
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	40550.79	61762.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	10987.25	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	2773.54	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Mary Ellen Balchunis for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	18623.27	34848.27
(ii) Unitemized.....	11147.26	18787.26
(iii) TOTAL of contributions from individuals ▶	29770.53	53635.53
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	11800.00	18800.00
(d) The Candidate.....	290.64	614.70
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	41861.17	73050.23
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.) .....	69.95	69.95
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)..... ▶	41931.12	73120.18

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	40620.74	61832.93
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 .....	300.00	300.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	40920.74	62132.93

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	9976.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	41931.12
25. SUBTOTAL (add Line 23 and Line 24).....	51907.99
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	40920.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10987.25

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

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

FOR LINE NUMBER: PAGE 5 OF 67  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Mary Ellen Balchunis for Congress**

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

Mailing Address 530 Spring Ln

City Wyndmoor State PA Zip Code 19038-8413

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

Name of Employer Univ of Pennsylvania Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : VNVQ3D27VS9**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 238 Chamounix Rd

City Wayne State PA Zip Code 19087-3606

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2014

**Transaction ID : VNVQ3CACAT8**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**George J. Badey III**

Mailing Address 450 Saint Davids Ave

City Wayne State PA Zip Code 19087-4203

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

Name of Employer Badey, Sloan & DiGenoa,PC Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2014

**Transaction ID : VNVQ3CACAS0**

Amount of Each Receipt this Period  
600.00

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

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

1850.00

**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 67
	<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)  
**Mary Ellen Balchunis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**George J. Badey III**

Mailing Address 450 Saint Davids Ave

City State Zip Code  
Wayne PA 19087-4203

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

Name of Employer Occupation  
Badey, Sloan & DiGenoa,PC Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4304.27**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 28 / 2014**

**Transaction ID : VNVQ3D3V8Y6**

Amount of Each Receipt this Period  
**104.27**

\* In-Kind: food for event

**B.** Full Name (Last, First, Middle Initial)  
**George J. Badey III**

Mailing Address 450 Saint Davids Ave

City State Zip Code  
Wayne PA 19087-4203

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

Name of Employer Occupation  
Badey, Sloan & DiGenoa,PC Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4774.27**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNVQ3D4CB59**

Amount of Each Receipt this Period  
**470.00**

\* In-Kind: Supporter housing

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

Mailing Address 1360 Monument St

City State Zip Code  
Concord MA 01742-5322

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNVQ3D2HYV9**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1574.27**

**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 67
	<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)  
**Mary Ellen Balchunis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marjorie M. Berlinghof**

Mailing Address 1433 Gentlemens Way

City Dresher State PA Zip Code 19025-1031

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

Name of Employer none Occupation housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 13 / 2014

**Transaction ID : VNVQ3CACBT1**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 1433 Gentlemens Way

City Dresher State PA Zip Code 19025-1031

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

Name of Employer none Occupation housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNVQ3D2CK04**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 203 Riverview Rd

City Swarthmore State PA Zip Code 19081-1217

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

Name of Employer self Occupation economist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **280.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : VNVQ3CZ1XN7**

Amount of Each Receipt this Period  
**180.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>930.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan P P. Cassanelli**

Mailing Address 426 Greenview Ln

City State Zip Code  
Havertown PA 19083-4317

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

Name of Employer Occupation  
C & R Lab Equipment Manufacturers Rep

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : VNVQ3CZ7032**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2830 Eldora Dr  
Apt 12

City State Zip Code  
Toledo OH 43613-5328

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

Name of Employer Occupation  
Toledo Public Schools Computer Operator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
199.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 16 / 2014

**Transaction ID : VNVQ3CDJ5T0**

Amount of Each Receipt this Period  
199.00

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

Mailing Address 2830 Eldora Dr  
Apt 12

City State Zip Code  
Toledo OH 43613-5328

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

Name of Employer Occupation  
Toledo Public Schools Computer Operator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
249.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNVQ3D2WPV9**

Amount of Each Receipt this Period  
50.00

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

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

1249.00



**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 67
	<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)  
**Mary Ellen Balchunis for Congress**

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

Mailing Address 584 Hickory Valley Rd

City Stroudsburg State PA Zip Code 18360-6846

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2014

**Transaction ID : VNVQ3CYNPD6**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 105 Townsend Ter

City Media State PA Zip Code 19063-4235

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

Name of Employer Ldworkinlaw Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : VNVQ3CDJ649**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 105 Townsend Ter

City Media State PA Zip Code 19063-4235

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

Name of Employer Ldworkinlaw Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 16 / 2014

**Transaction ID : VNVQ3CYXDQ8**

Amount of Each Receipt this Period  
150.00

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

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

900.00

**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 67
	<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)  
**Mary Ellen Balchunis for Congress**

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

Mailing Address 175 S Spring Mill Rd

City Villanova State PA Zip Code 19085-1408

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNVQ3D2EN86**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 134 Beechwood Rd

City Newtown Sq State PA Zip Code 19073-3805

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

Name of Employer Phila School District Occupation Teach

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 13 / 2014**

**Transaction ID : VNVQ3CACA60**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**William P. Fedullo esq.**

Mailing Address 121 S Broad St Ste 800

City Philadelphia State PA Zip Code 19107-4539

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

Name of Employer Philadelphia Bar Association Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 05 / 2014**

**Transaction ID : VNVQ3CXEAK0**

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 67
	<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)  
**Mary Ellen Balchunis for Congress**

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

Mailing Address 321 Durham Dr

City Villanova State PA Zip Code 19085-1451

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

Name of Employer Retired Occupation Frank's Beverages

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : VNVQ3CZ2XE8**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 1 Maplewood Dr

City Newtown Square State PA Zip Code 19073-3945

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

Name of Employer self Occupation physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNVQ3D2ABA9**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 3300 Darby Rd

City Haverford State PA Zip Code 19041-1016

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

Name of Employer retired Occupation retired chemical engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : VNVQ3CZ4358**

Amount of Each Receipt this Period  
**300.00**

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

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

**800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

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

Mailing Address 21 Tunbridge Rd  
Ste 200

City Haverford State PA Zip Code 19041-1038

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

Name of Employer Centura Capital Occupation Real Estate Investment Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : VNVQ3CZ2KD1**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 337 Dickinson Ave

City Swarthmore State PA Zip Code 19081-2002

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

Name of Employer South Philadelphia Pediatrics Occupation Pediatric Nurse Practitioner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 13 / 2014

**Transaction ID : VNVQ3CACC82**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 802 Maple Glen Rd

City Wayne State PA Zip Code 19087-4727

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 13 / 2014

**Transaction ID : VNVQ3CAC7W8**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lynn Hardy Yeakel**

Mailing Address 257 S Ithan Ave

City State Zip Code  
Bryn Mawr PA 19010-1044

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

Name of Employer Occupation  
Drexel University College of Medicine Director of Institute of Women's Health

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 13 / 2014

**Transaction ID : VNVQ3CACB47**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2589 Interstate Dr

City State Zip Code  
Harrisburg PA 17110-9602

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

Name of Employer Occupation  
SEIU Business Agent

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 13 / 2014

**Transaction ID : VNVQ3CACBB3**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 501 Chestnut Ln

City State Zip Code  
Wayne PA 19087-3407

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 13 / 2014

**Transaction ID : VNVQ3CACEG9**

Amount of Each Receipt this Period  
60.00

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

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

560.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

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

Mailing Address 501 Chestnut Ln

City State Zip Code  
Wayne PA 19087-3407

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 28 / 2014

**Transaction ID : VNVQ3CH7E31**

Amount of Each Receipt this Period  
30.00

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

Mailing Address 501 Chestnut Ln

City State Zip Code  
Wayne PA 19087-3407

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
240.00

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

**Transaction ID : VNVQ3D2KWX6**

Amount of Each Receipt this Period  
30.00

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

Mailing Address 501 Chestnut Ln

City State Zip Code  
Wayne PA 19087-3407

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify) Convention

Election Cycle-to-Date  
270.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNVQ3D2JB53**

Amount of Each Receipt this Period  
30.00

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

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

90.00

**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 67
	<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)  
**Mary Ellen Balchunis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John F. Innelli**

Mailing Address 8 Valley View Rd

City State Zip Code  
Rose Valley PA 19063-4234

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

Name of Employer Occupation  
Self Attonery

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 13 / 2014

**Transaction ID : VNVQ3CACDW1**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1742 Academy Ln

City State Zip Code  
Havertown PA 19083-1623

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

Name of Employer Occupation  
Teva Pharma Scientist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
335.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 09 / 2014

**Transaction ID : VNVQ3C94RC1**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 11 Oak Knoll Dr

City State Zip Code  
Wallingford PA 19086-6315

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

Name of Employer Occupation  
Duane Morris LLP Attonery

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 13 / 2014

**Transaction ID : VNVQ3CACCC09**

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 16 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

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

Mailing Address 100 Mill Rd

City Thornton State PA Zip Code 19373-1074

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

Name of Employer: STORIES THAT WORK INC. Occupation: Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 150.00

Date of Receipt: 07 / 13 / 2014

**Transaction ID : VNVQ3CACBM4**

Amount of Each Receipt this Period: 150.00

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

Mailing Address 100 Mill Rd

City Thornton State PA Zip Code 19373-1074

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

Name of Employer: STORIES THAT WORK INC. Occupation: Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 18 / 2014

**Transaction ID : VNVQ3CZ0GM5**

Amount of Each Receipt this Period: 100.00

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

Mailing Address 200 Barr Harbor Dr Ste 400

City Conshohocken State PA Zip Code 19428-2978

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

Name of Employer: LOWEY DANNENBERG COHEN HART Occupation: ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 13 / 2014

**Transaction ID : VNVQ3CAC6V9**

Amount of Each Receipt this Period: 1000.00

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

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

1250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

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

Mailing Address 230 S Fairville Rd

City State Zip Code  
Chadds Ford PA 19317-9469

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

Name of Employer Occupation  
Richard L Leff inc Book keeper

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : VNVQ3D2JNG2**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 115 Hunt Valley Cir

City State Zip Code  
Berwyn PA 19312-2301

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
470.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 13 / 2014

**Transaction ID : VNVQ3CAC7Z1**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 115 Hunt Valley Cir

City State Zip Code  
Berwyn PA 19312-2301

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
470.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 13 / 2014

**Transaction ID : VNVQ3CAC825**

Amount of Each Receipt this Period  
250.00

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

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

370.00

**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 67
	<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)  
**Mary Ellen Balchunis for Congress**

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

Mailing Address 115 Hunt Valley Cir

City State Zip Code  
Berwyn PA 19312-2301

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : VNVQ3CYR1F8**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 720 Haviland Dr

City State Zip Code  
Bryn Mawr PA 19010-1149

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

Name of Employer Occupation  
Mammuth and Rosenberg Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNVQ3D2J7M2**

Amount of Each Receipt this Period  
350.00

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

Mailing Address 850 Mill Rd

City State Zip Code  
Bryn Mawr PA 19010-2063

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

Name of Employer Occupation  
Radnor Township Commissioner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 13 / 2014

**Transaction ID : VNVQ3CACB63**

Amount of Each Receipt this Period  
100.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

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

Mailing Address 850 Mill Rd

City State Zip Code  
Bryn Mawr PA 19010-2063

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

Name of Employer Occupation  
Radnor Township Commissioner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : VNVQ3CZ43Q0**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 50 Kenmore Ln

City State Zip Code  
Media PA 19063-2078

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

Name of Employer Occupation  
Retired Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 13 / 2014

**Transaction ID : VNVQ3CACBP0**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 304 Crum Creek Ln

City State Zip Code  
Newtown Square PA 19073-1604

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

Name of Employer Occupation  
Philadelphia school dist Education

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 13 / 2014

**Transaction ID : VNVQ3CACAH7**

Amount of Each Receipt this Period  
300.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

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

Mailing Address 304 Crum Creek Ln

City State Zip Code  
Newtown Square PA 19073-1604

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

Name of Employer Occupation  
Philadelphia school dist Education

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 16 / 2014

**Transaction ID : VNVQ3CYXF26**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 501 Craig Ln

City State Zip Code  
Villanova PA 19085-1902

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

Name of Employer Occupation  
Zuckerman Honickman, Inc. Business executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 17 / 2014

**Transaction ID : VNVQ3CYZF49**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 207 Oakmont Dr

City State Zip Code  
Blue Bell PA 19422-3201

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

Name of Employer Occupation  
AstraZeneca Market Research

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 13 / 2014

**Transaction ID : VNVQ3CACB97**

Amount of Each Receipt this Period  
250.00

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

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

700.00

**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 21 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paul E. Schlenker**

Mailing Address 120 Sycamore Mills Rd

City State Zip Code  
Media PA 19063-2026

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 27 / 2014

**Transaction ID : VNVQ3CZVD53**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 200 N Wynnewood Ave  
Apt B220

City State Zip Code  
Wynnewood PA 19096-1415

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

Name of Employer Occupation  
Drexel medical Ccollege Teacher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : VNVQ3CZ0FF2**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 410 Oakwynne Dr

City State Zip Code  
Wynnewood PA 19096-2352

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

Name of Employer Occupation  
self accountant and consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : VNVQ3CZTD54**

Amount of Each Receipt this Period  
150.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

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

Mailing Address 813 Lawrence Ln

City State Zip Code  
Newtown Square PA 19073-2610

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

Name of Employer Occupation  
St. John Vianney Church Business Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 05 / 2014

**Transaction ID : VNVQ3CHHPQ3**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1919 Brandywine St

City State Zip Code  
Philadelphia PA 19130-3202

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : VNVQ3CXNGS3**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1919 Brandywine St

City State Zip Code  
Philadelphia PA 19130-3202

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : VNVQ3D25QQ7**

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: (check only one)	PAGE 23 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

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

Mailing Address 7 Roberts Rd

City State Zip Code  
Newtown Square PA 19073-2011

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 14 / 2014

**Transaction ID : VNVQ3CDJ5Q6**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 7 Roberts Rd

City State Zip Code  
Newtown Square PA 19073-2011

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 22 / 2014

**Transaction ID : VNVQ3CZ7ME0**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 5127 Pulaski Ave

City State Zip Code  
Philadelphia PA 19144-4021

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

Name of Employer Information Requested Occupation Information Requested  
Berkshire Hathaway HomeServices Fox & real estate broker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
900.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 22 / 2014

**Transaction ID : VNVQ3CZ7MB6**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

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

Mailing Address 81 Maple Ridge Rd

City State Zip Code  
Millville PA 17846-8933

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

Name of Employer Occupation  
Geisinger Medical Center Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 09 / 2014

**Transaction ID : VNVQ3CDJ462**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 700 Ardmore Ave  
Apt 307

City State Zip Code  
Ardmore PA 19003-1107

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

Name of Employer Occupation  
none retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2014

**Transaction ID : VNVQ3CZBC54**

Amount of Each Receipt this Period  
100.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

600.00

18623.27



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Area 14 Democratic Committee**

Mailing Address PO Box 166

City State Zip Code  
Blue Bell PA 19422-0166

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VNVQ3CDD0B1**

Amount of Each Receipt this Period

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

Mailing Address 1213 Morgan Ave

City State Zip Code  
Drexel Hill PA 19026-3330

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VNVQ3CACBH0**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Committee to Elect Gary Zlotnick**

Mailing Address 1728 Sue Ellen Dr

City State Zip Code  
Havertown PA 19083-1222

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VNVQ3CDJ6G3**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

**A. DAYLIN LEACH CANDIDATE COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 228  
 City State Zip Code  
 Jenkintown PA 19046-0228  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2014  
**Transaction ID : VNVQ3CGS1Q9**  
 Amount of Each Receipt this Period  
 500.00

**B. Deep Blue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1936  
 City State Zip Code  
 Media PA 19063-8936  
 FEC ID number of contributing federal political committee. **C C00455741**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2014  
**Transaction ID : VNVQ3CACA11**  
 Amount of Each Receipt this Period  
 1700.00

**C. Friends of Joe Sestak**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O Box 1926  
 City State Zip Code  
 Media PA 19063-8926  
 FEC ID number of contributing federal political committee. **C C00465492**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2014  
**Transaction ID : VNVQ3CAY225**  
 Amount of Each Receipt this Period  
 850.00  
 \* In-Kind: Event Catering and room rental

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

3050.00

**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 67
	<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)  
**Mary Ellen Balchunis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Montgomery County Democratic Women's Leadership Initiative**

Mailing Address 534 Bell Ln

City State Zip Code  
Maple Glen PA 19002-2829

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 26 / 2014

**Transaction ID : VNVQ3CKGPQ8**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**PENNSYLVANIA FEDERATION OF DEMOCRATIC WOMEN INC FEDERAL PAC**

Mailing Address 2311 Stetler Dr

City State Zip Code  
Coal Township PA 17866-1681

FEC ID number of contributing federal political committee. **C** C00338558

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2014

**Transaction ID : VNVQ3CYR284**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2791 Southampton Rd

City State Zip Code  
Philadelphia PA 19154-1211

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 02 / 2014

**Transaction ID : VNVQ3C8XS96**

Amount of Each Receipt this Period  
5000.00

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

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

6500.00

**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 67
	<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)  
**Mary Ellen Balchunis for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Upper Providence-Mid County Democratic Committee**

Mailing Address PO Box 487

City State Zip Code  
Lima PA 19037-0487

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VNVQ3D2BT35**

Amount of Each Receipt this Period

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

Mailing Address 684 Lawson Ave

City State Zip Code  
Havertown PA 19083-4108

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VNVQ3CACDH4**

Amount of Each Receipt this Period

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

Mailing Address 684 Lawson Ave

City State Zip Code  
Havertown PA 19083-4108

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VNVQ3CYXEX6**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>Mary Ellen Balchunis</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2014	
Mailing Address 35 Cedarbrook Rd		<b>Transaction ID : VNVQ3D3WYT1</b>	
City Ardmore    State PA    Zip Code 19003-1617	Amount of Each Receipt this Period _____ 5.00		
FEC ID number of contributing federal political committee. <b>C H4PA07092</b>	* In-Kind: Parking for campaign event		
Name of Employer LaSalle University    Occupation Professor	Election Cycle-to-Date _____ 329.06		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Mary Ellen Balchunis</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 19 / 2014	
Mailing Address 35 Cedarbrook Rd		<b>Transaction ID : VNVQ3D3WYZ0</b>	
City Ardmore    State PA    Zip Code 19003-1617	Amount of Each Receipt this Period _____ 5.00		
FEC ID number of contributing federal political committee. <b>C H4PA07092</b>	* In-Kind: Toll travel to campaign event		
Name of Employer LaSalle University    Occupation Professor	Election Cycle-to-Date _____ 337.06		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Mary Ellen Balchunis</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 19 / 2014	
Mailing Address 35 Cedarbrook Rd		<b>Transaction ID : VNVQ3D4J106</b>	
City Ardmore    State PA    Zip Code 19003-1617	Amount of Each Receipt this Period _____ 3.00		
FEC ID number of contributing federal political committee. <b>C H4PA07092</b>	* In-Kind: Travel expenses		
Name of Employer LaSalle University    Occupation Professor	Election Cycle-to-Date _____ 337.06		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 13.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>Mary Ellen Balchunis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2014
Mailing Address 35 Cedarbrook Rd		<b>Transaction ID : VNVQ3D4J0X2</b>
City Ardmore	State PA Zip Code 19003-1617	
FEC ID number of contributing federal political committee. C H4PA07092		Amount of Each Receipt this Period 12.50
Name of Employer LaSalle University	Occupation Professor	* In-Kind: Campaign Materials
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 353.76	

Full Name (Last, First, Middle Initial) <b>Mary Ellen Balchunis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2014
Mailing Address 35 Cedarbrook Rd		<b>Transaction ID : VNVQ3D4J0Z8</b>
City Ardmore	State PA Zip Code 19003-1617	
FEC ID number of contributing federal political committee. C H4PA07092		Amount of Each Receipt this Period 4.20
Name of Employer LaSalle University	Occupation Professor	* In-Kind: Travel expenses
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 353.76	

Full Name (Last, First, Middle Initial) <b>Mary Ellen Balchunis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 05 / 2014
Mailing Address 35 Cedarbrook Rd		<b>Transaction ID : VNVQ3D3WZG5</b>
City Ardmore	State PA Zip Code 19003-1617	
FEC ID number of contributing federal political committee. C H4PA07092		Amount of Each Receipt this Period 52.59
Name of Employer LaSalle University	Occupation Professor	* In-Kind: Food for campaign meeting
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 406.35	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	69.29
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>Mary Ellen Balchunis</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2014	
Mailing Address 35 Cedarbrook Rd		<b>Transaction ID : VNVQ3D3WZA7</b>	
City Ardmore    State PA    Zip Code 19003-1617	Amount of Each Receipt this Period _____ 52.50		
FEC ID number of contributing federal political committee. <b>C H4PA07092</b>	* In-Kind: Food for campaign event		
Name of Employer LaSalle University    Occupation Professor	Election Cycle-to-Date _____ 458.85		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Mary Ellen Balchunis</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2014	
Mailing Address 35 Cedarbrook Rd		<b>Transaction ID : VNVQ3D3WZN4</b>	
City Ardmore    State PA    Zip Code 19003-1617	Amount of Each Receipt this Period _____ 23.02		
FEC ID number of contributing federal political committee. <b>C H4PA07092</b>	* In-Kind: Food for campaign meeting		
Name of Employer LaSalle University    Occupation Professor	Election Cycle-to-Date _____ 481.87		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Mary Ellen Balchunis</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2014	
Mailing Address 35 Cedarbrook Rd		<b>Transaction ID : VNVQ3D3WZR8</b>	
City Ardmore    State PA    Zip Code 19003-1617	Amount of Each Receipt this Period _____ 20.23		
FEC ID number of contributing federal political committee. <b>C H4PA07092</b>	* In-Kind: Food for campaign meeting		
Name of Employer LaSalle University    Occupation Professor	Election Cycle-to-Date _____ 584.70		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 95.75
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 67
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>Mary Ellen Balchunis</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2014	
Mailing Address 35 Cedarbrook Rd		<b>Transaction ID : VNVQ3D3X027</b>	
City Ardmore    State PA    Zip Code 19003-1617	Amount of Each Receipt this Period _____ 17.60		
FEC ID number of contributing federal political committee. <b>C H4PA07092</b>	* In-Kind: Travel expense		
Name of Employer LaSalle University    Occupation Professor	Amount of Each Receipt this Period _____ 584.70		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 584.70		

Full Name (Last, First, Middle Initial) <b>Mary Ellen Balchunis</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2014	
Mailing Address 35 Cedarbrook Rd		<b>Transaction ID : VNVQ3D3X035</b>	
City Ardmore    State PA    Zip Code 19003-1617	Amount of Each Receipt this Period _____ 65.00		
FEC ID number of contributing federal political committee. <b>C H4PA07092</b>	* In-Kind: Travel expense		
Name of Employer LaSalle University    Occupation Professor	Amount of Each Receipt this Period _____ 584.70		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 584.70		

Full Name (Last, First, Middle Initial) <b>Mary Ellen Balchunis</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014	
Mailing Address 35 Cedarbrook Rd		<b>Transaction ID : VNVQ3D3WZW0</b>	
City Ardmore    State PA    Zip Code 19003-1617	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. <b>C H4PA07092</b>	* In-Kind: Travel expenses		
Name of Employer LaSalle University    Occupation Professor	Amount of Each Receipt this Period _____ 614.70		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 614.70		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 112.60
<b>TOTAL</b> This Period (last page this line number only).....	_____ 290.64



**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 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement MM / DD / YYYY 08 / 03 / 2014
Mailing Address PO Box 441146		Amount of Each Disbursement this Period 148.87
City West Somerville	State MA	
Zip Code 02144-0031	Purpose of Disbursement Conduit Fee	Transaction ID : VNTQV9NJGW5
Candidate Name <b>ActBlue</b>	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	ACT Blue charge
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2014
Mailing Address PO Box 441146		Amount of Each Disbursement this Period 0.12
City West Somerville	State MA	
Zip Code 02144-0031	Purpose of Disbursement Conduit Fee	Transaction ID : VNTQV9P5KK7
Candidate Name <b>ActBlue</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ActBlue</b>		Date of Disbursement MM / DD / YYYY 09 / 02 / 2014
Mailing Address PO Box 441146		Amount of Each Disbursement this Period 2.18
City West Somerville	State MA	
Zip Code 02144-0031	Purpose of Disbursement conduit fee	Transaction ID : VNTQV9PJRE4
Candidate Name <b>ActBlue</b>	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	151.17
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2014
Mailing Address PO Box 441146		Amount of Each Disbursement this Period 7.64
City West Somerville	State MA	
Zip Code 02144-0031	Purpose of Disbursement conduit fee	<b>Transaction ID : VNTQV9PJRBO</b>
Candidate Name <b>ActBlue</b>	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2014
Mailing Address PO Box 441146		Amount of Each Disbursement this Period 9.09
City West Somerville	State MA	
Zip Code 02144-0031	Purpose of Disbursement conduit fee	<b>Transaction ID : VNTQV9PJRD6</b>
Candidate Name <b>ActBlue</b>	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. George J. Badey III</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 450 Saint Davids Ave		Amount of Each Disbursement this Period 104.27
City Wayne	State PA	
Zip Code 19087-4203	Purpose of Disbursement food for event	<b>Transaction ID : VNVQ3D3V8Y6I</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	121.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. George J. Badey III</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 450 Saint Davids Ave		Amount of Each Disbursement this Period 470.00
City Wayne	State PA Zip Code 19087-4203	
Purpose of Disbursement Supporter housing	Category/Type	Transaction ID : VNVQ3D4CB59I
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mary Ellen Balchunis</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 35 Cedarbrook Rd		Amount of Each Disbursement this Period 5.00
City Ardmore	State PA Zip Code 19003-1617	
Purpose of Disbursement Parking for campaign event	Category/Type	Transaction ID : VNVQ3D3WYT1I
Candidate Name <b>Dr. Mary Ellen Balchunis</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: PA District: 07		

Full Name (Last, First, Middle Initial) <b>c. Mary Ellen Balchunis</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2014
Mailing Address 35 Cedarbrook Rd		Amount of Each Disbursement this Period 5.00
City Ardmore	State PA Zip Code 19003-1617	
Purpose of Disbursement Toll travel to campaign event	Category/Type	Transaction ID : VNVQ3D3WYZ0I
Candidate Name <b>Dr. Mary Ellen Balchunis</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: PA District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	480.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mary Ellen Balchunis</b>		Date of Disbursement MM / DD / YYYY 07 / 19 / 2014
Mailing Address 35 Cedarbrook Rd		Amount of Each Disbursement this Period \$ 3.00 <b>Transaction ID : VNVQ3D4J106I</b>
City Ardmore State PA Zip Code 19003-1617	Purpose of Disbursement Travel expenses	
Candidate Name <b>Dr. Mary Ellen Balchunis</b>		* In-Kind Received
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 07	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Mary Ellen Balchunis</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2014
Mailing Address 35 Cedarbrook Rd		Amount of Each Disbursement this Period \$ 12.50 <b>Transaction ID : VNVQ3D4J0X2I</b>
City Ardmore State PA Zip Code 19003-1617	Purpose of Disbursement Campaign Materials	
Candidate Name <b>Dr. Mary Ellen Balchunis</b>		* In-Kind Received
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 07	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Mary Ellen Balchunis</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2014
Mailing Address 35 Cedarbrook Rd		Amount of Each Disbursement this Period \$ 4.20 <b>Transaction ID : VNVQ3D4J0Z8I</b>
City Ardmore State PA Zip Code 19003-1617	Purpose of Disbursement Travel expenses	
Candidate Name <b>Dr. Mary Ellen Balchunis</b>		* In-Kind Received
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 07	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	\$ 19.70
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 67			
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mary Ellen Balchunis</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 35 Cedarbrook Rd		Amount of Each Disbursement this Period 52.59
City Ardmore	State PA	
Zip Code 19003-1617	Purpose of Disbursement Food for campaign meeting	Transaction ID : VNVQ3D3WZG5I
Candidate Name <b>Dr. Mary Ellen Balchunis</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	* In-Kind Received
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: PA	District: 07	

Full Name (Last, First, Middle Initial) <b>B. Mary Ellen Balchunis</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2014
Mailing Address 35 Cedarbrook Rd		Amount of Each Disbursement this Period 52.50
City Ardmore	State PA	
Zip Code 19003-1617	Purpose of Disbursement Food for campaign event	Transaction ID : VNVQ3D3WZA7I
Candidate Name <b>Dr. Mary Ellen Balchunis</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	* In-Kind Received
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: PA	District: 07	

Full Name (Last, First, Middle Initial) <b>c. Mary Ellen Balchunis</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 35 Cedarbrook Rd		Amount of Each Disbursement this Period 23.02
City Ardmore	State PA	
Zip Code 19003-1617	Purpose of Disbursement Food for campaign meeting	Transaction ID : VNVQ3D3WZN4I
Candidate Name <b>Dr. Mary Ellen Balchunis</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	* In-Kind Received
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: PA	District: 07	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	128.11
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mary Ellen Balchunis</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2014
Mailing Address 35 Cedarbrook Rd		Amount of Each Disbursement this Period 102.23 <b>Transaction ID : VNVQ3D3WZR8I</b>
City Ardmore State PA Zip Code 19003-1617	Purpose of Disbursement Food for campaign meeting	
Candidate Name <b>Dr. Mary Ellen Balchunis</b>	Category/Type	* In-Kind Received
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Mary Ellen Balchunis</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2014
Mailing Address 35 Cedarbrook Rd		Amount of Each Disbursement this Period 17.60 <b>Transaction ID : VNVQ3D3X027I</b>
City Ardmore State PA Zip Code 19003-1617	Purpose of Disbursement Travel expense	
Candidate Name <b>Dr. Mary Ellen Balchunis</b>	Category/Type	* In-Kind Received
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Mary Ellen Balchunis</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2014
Mailing Address 35 Cedarbrook Rd		Amount of Each Disbursement this Period 65.00 <b>Transaction ID : VNVQ3D3X035I</b>
City Ardmore State PA Zip Code 19003-1617	Purpose of Disbursement Travel expense	
Candidate Name <b>Dr. Mary Ellen Balchunis</b>	Category/Type	* In-Kind Received
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	102.83
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mary Ellen Balchunis</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 35 Cedarbrook Rd		Amount of Each Disbursement this Period 30.00
City Ardmore	State PA Zip Code 19003-1617	
Purpose of Disbursement Travel expenses		Transaction ID : VNVQ3D3WZW01
Candidate Name <b>Dr. Mary Ellen Balchunis</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: PA District: 07	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Cheltenham Printing Company</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 518 Ryers Ave Bulding #2, First Floor		Amount of Each Disbursement this Period 76.32
City Cheltenham	State PA Zip Code 19012-2131	
Purpose of Disbursement Campaign Materials		Transaction ID : VNTQV9N76B2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 006	

Full Name (Last, First, Middle Initial) <b>c. Cheltenham Printing Company</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 518 Ryers Ave Bulding #2, First Floor		Amount of Each Disbursement this Period 350.86
City Cheltenham	State PA Zip Code 19012-2131	
Purpose of Disbursement Campaign Materials		Transaction ID : VNTQV9N76C0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 006	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	457.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Steven Chintaman</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 51 Forest Ln		Amount of Each Disbursement this Period 101.08
City Levittown	State PA	
Zip Code 19055-2125	Purpose of Disbursement Staff travel	<b>Transaction ID : VNTQV9PNKY0</b>
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 7434 Ogontz Ave		Amount of Each Disbursement this Period 33.10
City Philadelphia	State PA	
Zip Code 19138-1324	Purpose of Disbursement Travel expense	<b>Transaction ID : VNTQV9PPAY9</b>
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Steven Chintaman</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 51 Forest Ln		Amount of Each Disbursement this Period 101.08
City Levittown	State PA	
Zip Code 19055-2125	Purpose of Disbursement Staff travel	<b>Transaction ID : VNTQV9PA922</b>
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	202.16
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Steven Chintaman</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 51 Forest Ln		Amount of Each Disbursement this Period 6.30
City Levittown	State PA	
Zip Code 19055-2125	Purpose of Disbursement Printing	<b>Transaction ID : VNTQV9PA948</b>
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 1305 W Chester Pike Ste 18		Amount of Each Disbursement this Period 6.30
City Havertown	State PA	
Zip Code 19083-2929	Purpose of Disbursement Printing	<b>Transaction ID : VNTQV9PA930</b>
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Steven Chintaman</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 51 Forest Ln		Amount of Each Disbursement this Period 1750.00
City Levittown	State PA	
Zip Code 19055-2125	Purpose of Disbursement Staff Salary	<b>Transaction ID : VNTQV9PBNJ1</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1756.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cricket Wireless 8301</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 5721 N Broad St		Amount of Each Disbursement this Period 62.00 <b>Transaction ID : VNTQV9PN4F1</b>
City Philadelphia State PA Zip Code 19141-2307	Purpose of Disbursement Cricket Phone Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Cricket Wireless 8301</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 5721 N Broad St		Amount of Each Disbursement this Period 57.00 <b>Transaction ID : VNTQV9ND9Y6</b>
City Philadelphia State PA Zip Code 19141-2307	Purpose of Disbursement Cricket Phone Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Cricket Wireless 8301</b>		Date of Disbursement MM / DD / YYYY 09 / 08 / 2014
Mailing Address 5721 N Broad St		Amount of Each Disbursement this Period 57.00 <b>Transaction ID : VNTQV9P9K25</b>
City Philadelphia State PA Zip Code 19141-2307	Purpose of Disbursement Cricket Phone Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	176.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Friends of Joe Sestak</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2014
Mailing Address P.O Box 1926		Amount of Each Disbursement this Period 850.00 <b>Transaction ID : VNVQ3CAY225I</b>
City Media	State PA	
Zip Code 19063-8926	Purpose of Disbursement Event Catering and room rental	* In-Kind Received
Candidate Name <b>Adm. Joe Sestak</b>	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA	District: 00	

Full Name (Last, First, Middle Initial) <b>B. Lake Research Partners</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2014
Mailing Address 1726 M St NW Ste 1100		Amount of Each Disbursement this Period 18852.60 <b>Transaction ID : VNTQV9PBY65</b>
City Washington	State DC	
Zip Code 20036-4528	Purpose of Disbursement Poll	Category/Type 005
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State:	
District:		

Full Name (Last, First, Middle Initial) <b>c. Judith LaLonde</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 1742 Academy Ln		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : VNTQV9ND7Q7</b>
City Havertown	State PA	
Zip Code 19083-1623	Purpose of Disbursement Reimbursement for NGP	Category/Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State:	
District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	20402.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 67			
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 700.00
City Washington	State DC	
Zip Code 20005-5006	Purpose of Disbursement NGP	Transaction ID : VNTQV9ND7S3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kisha Larry</b>		Date of Disbursement MM / DD / YYYY 07 / 26 / 2014
Mailing Address 7335 Chestnut Ave Fl 3		Amount of Each Disbursement this Period 49.07
City Elkins Park	State PA	
Zip Code 19027-3217	Purpose of Disbursement Reimbursemnt Travel	Transaction ID : VNTQV9N76E5
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kisha Larry</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address 7335 Chestnut Ave Fl 3		Amount of Each Disbursement this Period 200.00
City Elkins Park	State PA	
Zip Code 19027-3217	Purpose of Disbursement Staff part-time salary	Transaction ID : VNTQV9P8179
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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.

NAME OF COMMITTEE (In Full)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kisha Larry</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 7335 Chestnut Ave F13		Amount of Each Disbursement this Period 62.75
City Elkins Park	State PA Zip Code 19027-3217	
Purpose of Disbursement Staff Travel	Category/Type 002	<b>Transaction ID : VNTQV9P81Z8</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address 7434 Ogontz Ave		Amount of Each Disbursement this Period 32.75
City Philadelphia	State PA Zip Code 19138-1324	
Purpose of Disbursement Travel expense	Category/Type 002	<b>Transaction ID : VNTQV9PPDV2</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial) <b>c. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 7434 Ogontz Ave		Amount of Each Disbursement this Period 30.00
City Philadelphia	State PA Zip Code 19138-1324	
Purpose of Disbursement Travel expense	Category/Type 002	<b>Transaction ID : VNTQV9PPGA4</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**[MEMO ITEM]**  
\*

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	62.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 67	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kisha Larry</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 7335 Chestnut Ave FI 3		Amount of Each Disbursement this Period 77.78
City Elkins Park	State PA Zip Code 19027-3217	
Purpose of Disbursement Staff Travel	Category/Type 002	Transaction ID : VNTQV9PA906
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kisha Larry</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 7335 Chestnut Ave FI 3		Amount of Each Disbursement this Period 250.00
City Elkins Park	State PA Zip Code 19027-3217	
Purpose of Disbursement Staff part-time salary	Category/Type 001	Transaction ID : VNTQV9PA914
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kisha Larry</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 7335 Chestnut Ave FI 3		Amount of Each Disbursement this Period 17.99
City Elkins Park	State PA Zip Code 19027-3217	
Purpose of Disbursement Campaign Event Food	Category/Type 007	Transaction ID : VNTQV9PA971
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	345.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kisha Larry</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 7335 Chestnut Ave FI 3		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : VNTQV9PN460</b>
City Elkins Park	State PA Zip Code 19027-3217	
Purpose of Disbursement Staff part-time salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kisha Larry</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 7335 Chestnut Ave FI 3		Amount of Each Disbursement this Period 430.00 <b>Transaction ID : VNTQV9PBP01</b>
City Elkins Park	State PA Zip Code 19027-3217	
Purpose of Disbursement Staff part-time salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kisha Larry</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 7335 Chestnut Ave FI 3		Amount of Each Disbursement this Period 56.15 <b>Transaction ID : VNTQV9PBQX1</b>
City Elkins Park	State PA Zip Code 19027-3217	
Purpose of Disbursement Staff Travel	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	586.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 7434 Ogontz Ave		Amount of Each Disbursement this Period 27.25
City Philadelphia	State PA Zip Code 19138-1324	
Purpose of Disbursement Event Travel	Category/Type 002	Transaction ID : VNTQV9PBR05
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kisha Larry</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2014
Mailing Address 7335 Chestnut Ave FI 3		Amount of Each Disbursement this Period 100.00
City Elkins Park	State PA Zip Code 19027-3217	
Purpose of Disbursement Staff part-time salary	Category/Type 001	Transaction ID : VNTQV9PCYJ8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kisha Larry</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2014
Mailing Address 7335 Chestnut Ave FI 3		Amount of Each Disbursement this Period 30.00
City Elkins Park	State PA Zip Code 19027-3217	
Purpose of Disbursement Staff Travel	Category/Type 002	Transaction ID : VNTQV9PCYN2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	130.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 67			
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kisha Larry</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2014
Mailing Address 7335 Chestnut Ave FI 3		Amount of Each Disbursement this Period 30.42
City Elkins Park	State PA Zip Code 19027-3217	
Purpose of Disbursement Staff reimbursement	Category/Type 001	Transaction ID : VNTQV9PCYP0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2014
Mailing Address 7434 Ogontz Ave		Amount of Each Disbursement this Period 30.42
City Philadelphia	State PA Zip Code 19138-1324	
Purpose of Disbursement Travel expense	Category/Type 002	Transaction ID : VNTQV9PQV24
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM] *

Full Name (Last, First, Middle Initial) <b>c. Kisha Larry</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2014
Mailing Address 7335 Chestnut Ave FI 3		Amount of Each Disbursement this Period 11.18
City Elkins Park	State PA Zip Code 19027-3217	
Purpose of Disbursement Staff reimbursement	Category/Type 004	Transaction ID : VNTQV9PQTQ7
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	41.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 444 E Township Line Rd		Amount of Each Disbursement this Period 11.18
City Havertown	State PA	
Zip Code 19083-0362	Purpose of Disbursement Postage	Transaction ID : VNTQV9PQTR5
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michael Lehman</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2014
Mailing Address 24 West Baltimore Street		Amount of Each Disbursement this Period 24.32
City Funkstown	State MD	
Zip Code 21734	Purpose of Disbursement Reimbursemnt Travel	Transaction ID : VNTQV9P0PE7
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Staff Reimbursement
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Michael Lehman</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 24 West Baltimore Street		Amount of Each Disbursement this Period 22.50
City Funkstown	State MD	
Zip Code 21734	Purpose of Disbursement Staff reimbursement	Transaction ID : VNTQV9PQTS3
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	46.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Liberty Mutual</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 175 Berkeley St		Amount of Each Disbursement this Period 500.00
City Boston	State MA Zip Code 02116-5066	
Purpose of Disbursement Insurance Office Rental	Category/Type 001	<b>Transaction ID : VNTQV9P81J6</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NGP</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 700.00
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement NGP database	Category/Type 003	<b>Transaction ID : VNTQV9PN4G9</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Pennsylvania Democratic Party</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 205 State St		Amount of Each Disbursement this Period 2390.00
City Harrisburg	State PA Zip Code 17101-1130	
Purpose of Disbursement Unlimited transfer to party committee	Category/Type 001	<b>Transaction ID : VNTQV9P0N37</b>
Candidate Name <b>Pennsylvania Democratic Party</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Balchunis June Staff Investment
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3590.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pennsylvania Democratic Party</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 20 / 2014</b>
Mailing Address <b>205 State St</b>		Amount of Each Disbursement this Period <b>4145.93</b>
City <b>Harrisburg</b> State <b>PA</b> Zip Code <b>17101-1130</b>	Purpose of Disbursement <b>Voter File</b>	
Candidate Name <b>Pennsylvania Democratic Party</b>	Category/Type <b>001</b>	<b>Transaction ID : VNTQV9NQNK3</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Pennsylvania Democratic Party</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 30 / 2014</b>
Mailing Address <b>205 State St</b>		Amount of Each Disbursement this Period <b>2506.00</b>
City <b>Harrisburg</b> State <b>PA</b> Zip Code <b>17101-1130</b>	Purpose of Disbursement <b>Unlimited transfer to party committee</b>	
Candidate Name <b>Pennsylvania Democratic Party</b>	Category/Type <b>001</b>	<b>Transaction ID : VNTQV9P0MQ3</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Sage Payment Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 30 / 2014</b>
Mailing Address <b>1750 Old Meadow Rd Ste 300</b>		Amount of Each Disbursement this Period <b>75.00</b>
City <b>McLean</b> State <b>VA</b> Zip Code <b>22102-4304</b>	Purpose of Disbursement <b>Merchant fee</b>	
Candidate Name	Category/Type <b>003</b>	<b>Transaction ID : VNTQV9NGWA0</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>6726.93</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sage Payment Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 1750 Old Meadow Rd Ste 300		Amount of Each Disbursement this Period 353.04
City McLean	State VA Zip Code 22102-4304	
Purpose of Disbursement Merchant fee	Category/Type 003	Transaction ID : VNTQV9NGW92
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sage Payment Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 1750 Old Meadow Rd Ste 300		Amount of Each Disbursement this Period 48.88
City McLean	State VA Zip Code 22102-4304	
Purpose of Disbursement Merchant fee	Category/Type 003	Transaction ID : VNTQV9P8187
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 1305 W Chester Pike Ste 18		Amount of Each Disbursement this Period 113.05
City Havertown	State PA Zip Code 19083-2929	
Purpose of Disbursement Mailing	Category/Type 006	Transaction ID : VNTQV9MWS57
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	514.97
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2014
Mailing Address 1305 W Chester Pike Ste 18		Amount of Each Disbursement this Period 10.59
City Havertown	State PA	
Zip Code 19083-2929	Purpose of Disbursement Mailing	<b>Transaction ID : VNTQV9MWS49</b>
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 1305 W Chester Pike Ste 18		Amount of Each Disbursement this Period 13.24
City Havertown	State PA	
Zip Code 19083-2929	Purpose of Disbursement Office supplies	<b>Transaction ID : VNTQV9N2BC1</b>
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 1305 W Chester Pike Ste 18		Amount of Each Disbursement this Period 91.14
City Havertown	State PA	
Zip Code 19083-2929	Purpose of Disbursement Office supplies	<b>Transaction ID : VNTQV9NGWG7</b>
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	114.97
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 67			
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 1305 W Chester Pike Ste 18		Amount of Each Disbursement this Period 71.96
City Havertown	State PA	
Zip Code 19083-2929	Purpose of Disbursement Office supplies	Transaction ID : VNTQV9NGWB8
Candidate Name	Category/ Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2014
Mailing Address 1305 W Chester Pike Ste 18		Amount of Each Disbursement this Period 153.43
City Havertown	State PA	
Zip Code 19083-2929	Purpose of Disbursement Office supplies	Transaction ID : VNTQV9NQY28
Candidate Name	Category/ Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement MM / DD / YYYY 09 / 08 / 2014
Mailing Address 1305 W Chester Pike Ste 18		Amount of Each Disbursement this Period 24.36
City Havertown	State PA	
Zip Code 19083-2929	Purpose of Disbursement Office supplies	Transaction ID : VNTQV9P9K33
Candidate Name	Category/ Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	249.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 67			
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 1305 W Chester Pike Ste 18		Amount of Each Disbursement this Period 44.51
City Havertown	State PA	
Zip Code 19083-2929	Purpose of Disbursement Office supplies	Transaction ID : VNTQV9P9K41
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 1305 W Chester Pike Ste 18		Amount of Each Disbursement this Period 91.99
City Havertown	State PA	
Zip Code 19083-2929	Purpose of Disbursement Office supplies	Transaction ID : VNTQV9PQYD4
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 1305 W Chester Pike Ste 18		Amount of Each Disbursement this Period 6.35
City Havertown	State PA	
Zip Code 19083-2929	Purpose of Disbursement Office supplies	Transaction ID : VNTQV9PPCC1
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	142.85
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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.

NAME OF COMMITTEE (In Full)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sunoco</b>			Date of Disbursement MM / DD / YYYY 08 / 28 / 2014	
Mailing Address 7434 Ogontz Ave			Amount of Each Disbursement this Period 53.07	
City Philadelphia	State PA	Zip Code 19138-1324	Transaction ID : VNTQV9P0MY8	
Purpose of Disbursement Event Travel		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Sunoco</b>			Date of Disbursement MM / DD / YYYY 09 / 05 / 2014	
Mailing Address 7434 Ogontz Ave			Amount of Each Disbursement this Period 46.60	
City Philadelphia	State PA	Zip Code 19138-1324	Transaction ID : VNTQV9PPBP9	
Purpose of Disbursement Travel expense		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Sunoco</b>			Date of Disbursement MM / DD / YYYY 09 / 10 / 2014	
Mailing Address 7434 Ogontz Ave			Amount of Each Disbursement this Period 25.33	
City Philadelphia	State PA	Zip Code 19138-1324	Transaction ID : VNTQV9PCYM4	
Purpose of Disbursement Event Travel		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	125.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 444 E Township Line Rd		Amount of Each Disbursement this Period 78.40
City Havertown	State PA	
Zip Code 19083-0362	Purpose of Disbursement Postage	<b>Transaction ID : VNTQV9MWP84</b>
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 444 E Township Line Rd		Amount of Each Disbursement this Period 49.00
City Havertown	State PA	
Zip Code 19083-0362	Purpose of Disbursement Postage	<b>Transaction ID : VNTQV9N2BA5</b>
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 444 E Township Line Rd		Amount of Each Disbursement this Period 49.00
City Havertown	State PA	
Zip Code 19083-0362	Purpose of Disbursement Postage	<b>Transaction ID : VNTQV9N6359</b>
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	176.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 444 E Township Line Rd		Amount of Each Disbursement this Period 49.00 <b>Transaction ID : VNTQV9NGWE1</b>
City Havertown	State PA	
Zip Code 19083-0362	Purpose of Disbursement Postage	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 444 E Township Line Rd		Amount of Each Disbursement this Period 40.00 <b>Transaction ID : VNTQV9NQXK0</b>
City Havertown	State PA	
Zip Code 19083-0362	Purpose of Disbursement PO Box	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 444 E Township Line Rd		Amount of Each Disbursement this Period 98.00 <b>Transaction ID : VNTQV9P82B3</b>
City Havertown	State PA	
Zip Code 19083-0362	Purpose of Disbursement Postage	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	187.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 444 E Township Line Rd		Amount of Each Disbursement this Period 49.00
City Havertown	State PA	
Zip Code 19083-0362	Purpose of Disbursement Postage	<b>Transaction ID : VNTQV9PK59</b>
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 444 E Township Line Rd		Amount of Each Disbursement this Period 49.00
City Havertown	State PA	
Zip Code 19083-0362	Purpose of Disbursement Postage	<b>Transaction ID : VNTQV9PCYK6</b>
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United States Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 444 E Township Line Rd		Amount of Each Disbursement this Period 49.00
City Havertown	State PA	
Zip Code 19083-0362	Purpose of Disbursement Postage	<b>Transaction ID : VNTQV9PK2Z7</b>
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	147.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 67	
	<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)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. YS Properties LP</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address 7300 City Ave		Amount of Each Disbursement this Period 1700.00
City Philadelphia	State PA Zip Code 19151-2218	
Purpose of Disbursement Office rental	Category/Type 001	<b>Transaction ID : VNTQV9NWDP8</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1700.00
<b>TOTAL</b> This Period (last page this line number only).....	39085.01

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 67	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mary Ellen Balchunis for Congress**

Full Name (Last, First, Middle Initial) <b>A. Variety, the Children's Charity</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 100 N 18th St Ste 300		Amount of Each Disbursement this Period 300.00
City Philadelphia	State PA Zip Code 19103-2778	
Purpose of Disbursement Charity Benefit Event	Candidate Name	Transaction ID : VNTQV9NQY78
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	300.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 63 OF 67
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Mary Ellen Balchunis for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Michael Lehman</b>	Nature of Debt (Purpose): Salary for August
Mailing Address 24 West Baltimore Street	
City State Zip Code Funkstown MD 21734	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : VNRSB9H6GE0</b>	
Amount Incurred This Period 2612.90	Payment This Period 0.00	Outstanding Balance at Close of This Period 2612.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Michael Lehman</b>	Nature of Debt (Purpose): Office supplies
Mailing Address 24 West Baltimore Street	
City State Zip Code Funkstown MD 21734	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : VNRSB9H6F40</b>	
Amount Incurred This Period 36.03	Payment This Period 0.00	Outstanding Balance at Close of This Period 36.03

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Michael Lehman</b>	Nature of Debt (Purpose): Office supplies
Mailing Address 24 West Baltimore Street	
City State Zip Code Funkstown MD 21734	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : VNRSB9H6F58</b>	
Amount Incurred This Period 40.79	Payment This Period 0.00	Outstanding Balance at Close of This Period 40.79

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	2689.72
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD9

Transaction ID : VNRSB9H6F40

McCord invitations

Form/Schedule:

Transaction ID:



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

NAME OF COMMITTEE (In Full)

**Mary Ellen Balchunis for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Michael Lehman</b>		Nature of Debt (Purpose): Office supplies
Mailing Address 24 West Baltimore Street		
City State Funkstown MD	Zip Code 21734	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VNRSB9H6F82	
Amount Incurred This Period 36.03	Payment This Period 0.00	Outstanding Balance at Close of This Period 36.03

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Michael Lehman</b>		Nature of Debt (Purpose): Office supplies
Mailing Address 24 West Baltimore Street		
City State Funkstown MD	Zip Code 21734	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VNRSB9H6F74	
Amount Incurred This Period 31.79	Payment This Period 0.00	Outstanding Balance at Close of This Period 31.79

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Michael Lehman</b>		Nature of Debt (Purpose): Fundraising expenses
Mailing Address 24 West Baltimore Street		
City State Funkstown MD	Zip Code 21734	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VNRSB9H6F66	
Amount Incurred This Period 16.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 16.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	83.82
2) <b>TOTALS</b> This Period (last page this line number only) .....	2773.54
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	2773.54

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

NAME OF COMMITTEE (In Full)

**Mary Ellen Balchunis for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Judith LaLonde</b>		Nature of Debt (Purpose): Paid software bill; not yet reimbursed
Mailing Address 1742 Academy Ln		
City State	Zip Code	
Havertown PA	19083-1623	

Outstanding Balance Beginning This Period	Transaction ID : VNRSB9H5Q56	
<input type="text" value="700.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="700.00"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="0.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

Form/Schedule: SD10

Transaction ID : VNRSB9H5Q56

Treasurer defrayed cost of NGP bill but had not been reimbursed by date of report.

Form/Schedule:

Transaction ID: