

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Larchuk for a Better Congress, Inc.

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	5181.59	26729.59
(b) Total Contribution Refunds (from Line 20(d))	500.00	501.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	4681.59	26228.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	45767.94	161332.08
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	45767.94	161332.08
8. Cash on Hand at Close of Reporting Period (from Line 27).....	122201.51	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	260000.00	

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

Larchuk for a Better Congress, Inc.

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4300.00	14750.00
(ii) Unitemized.....	880.00	1978.00
(iii) TOTAL of contributions from individuals ▶	5180.00	16728.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1.59	1.59
(d) The Candidate.....	0.00	10000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5181.59	26729.59
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	140000.00	260000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	140000.00	260000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	145181.59	286729.59

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	45767.94	161332.08
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	500.00	501.00
(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)).....	500.00	501.00
21. OTHER DISBURSEMENTS	2570.00	2695.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	48837.94	164528.08

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	25857.86
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	145181.59
25. SUBTOTAL (add Line 23 and Line 24).....	171039.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	48837.94
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	122201.51

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 97
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Stuart Benson		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 15 / 2015
Mailing Address 2116 Grandeur Dr		Transaction ID : VPFMPGAW5D3
City Gibsonia	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Information Requested	Occupation Attorney	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Albert Calfo		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 24 / 2015
Mailing Address 127 Lamplighter Lane		Transaction ID : VPFMPG7TDX4
City McMurray	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Sunridge Solutions	Occupation Medical Billing	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00	

Full Name (Last, First, Middle Initial) C. International Brotherhood of Boilermakers Local 154 Campaign Assistance Fund		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 03 / 2015
Mailing Address 1221 Banksville Rd		Transaction ID : VPFMPG3YRZ8
City Pittsburgh	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 0.00	

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 97
	<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)
Larchuk for a Better Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Todd Larchuk

Mailing Address 200 S Laurel Ave
Bldg D

City Middletown State NJ Zip Code 07748-1914

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

Name of Employer AT&T Occupation Principal Inventive Scientist, Enginee

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : VPFMPGC6VC4

Amount of Each Receipt this Period
 250.00

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

Mailing Address 4367 Chicora St

City Columbia State SC Zip Code 29206

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

Name of Employer pair Networks, Inc Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : VPFMPGC0Q93

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
Donna Wetzel CPA

Mailing Address 406 Kingsberry Cir

City Pittsburgh State PA Zip Code 15234-1070

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

Name of Employer Information Requested Occupation CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : VPFMPGAXCJ7

Amount of Each Receipt this Period
 300.00

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

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

3250.00

4300.00

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

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

FOR LINE NUMBER: (check only one)		PAGE 7 OF 97	
<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)
Larchuk for a Better Congress, Inc.

A. Full Name (Last, First, Middle Initial)
ACTBLUE FED (CITI CONDUIT)

Mailing Address **PO Box 441146**

City **West Somerville** State **MA** Zip Code **02144-0031**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 01 / 2015

Transaction ID : VPFMPGACA12

Amount of Each Receipt this Period
 1.59

* Earmarked Contribution: See Below

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1.59

1.59

**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 97
<input type="checkbox"/> 11a 12	<input checked="" 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)
Larchuk for a Better Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Steven B Larchuk

Mailing Address 1609 Stone Mansion Dr

City State Zip Code
Sewickley PA 15143-8600

FEC ID number of contributing federal political committee. **C H6PA12089**

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
125000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 07 / 2015

Transaction ID : VPFMPGACA20

Amount of Each Receipt this Period
5000.00

Personal Loan from Candidate

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

Mailing Address 1609 Stone Mansion Dr

City State Zip Code
Sewickley PA 15143-8600

FEC ID number of contributing federal political committee. **C H6PA12089**

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
130000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 13 / 2015

Transaction ID : VPFMPG5QR11

Amount of Each Receipt this Period
5000.00

Personal Loan from Candidate

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

Mailing Address 1609 Stone Mansion Dr

City State Zip Code
Sewickley PA 15143-8600

FEC ID number of contributing federal political committee. **C H6PA12089**

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
135000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 16 / 2015

Transaction ID : VPFMPG678W5

Amount of Each Receipt this Period
5000.00

Personal Loan from Candidate

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

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

15000.00

**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 97
<input type="checkbox"/> 11a 12	<input checked="" 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)
Larchuk for a Better Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Steven B Larchuk

Mailing Address 1609 Stone Mansion Dr

City State Zip Code
Sewickley PA 15143-8600

FEC ID number of contributing federal political committee. **C H6PA12089**

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
140000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 19 / 2015

Transaction ID : VPFMPG70XT9

Amount of Each Receipt this Period
5000.00

Personal Loan from Candidate

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

Mailing Address 1609 Stone Mansion Dr

City State Zip Code
Sewickley PA 15143-8600

FEC ID number of contributing federal political committee. **C H6PA12089**

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
145000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 24 / 2015

Transaction ID : VPFMPG7TDY2

Amount of Each Receipt this Period
5000.00

Personal Loan from Candidate

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

Mailing Address 1609 Stone Mansion Dr

City State Zip Code
Sewickley PA 15143-8600

FEC ID number of contributing federal political committee. **C H6PA12089**

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
150000.00

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

Transaction ID : VPFMPGAAD22

Amount of Each Receipt this Period
5000.00

Personal Loan from Candidate

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

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

15000.00

**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 97
<input type="checkbox"/> 11a 12	<input checked="" 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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Steven B Larchuk		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 03 / 2015
Mailing Address 1609 Stone Mansion Dr		Transaction ID : VPFMPGCP2B7
City Sewickley	State PA	
Zip Code 15143-8600		Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C H6PA12089		Personal Loan from Candidate
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 155000.00	

Full Name (Last, First, Middle Initial) B. Steven B Larchuk		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 04 / 2015
Mailing Address 1609 Stone Mansion Dr		Transaction ID : VPFMPGCP2C5
City Sewickley	State PA	
Zip Code 15143-8600		Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C H6PA12089		Personal Loan from Candidate
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 160000.00	

Full Name (Last, First, Middle Initial) C. Steven B Larchuk		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 18 / 2015
Mailing Address 1609 Stone Mansion Dr		Transaction ID : VPFMPGB2S32
City Sewickley	State PA	
Zip Code 15143-8600		Amount of Each Receipt this Period 100000.00
FEC ID number of contributing federal political committee. C H6PA12089		Personal Loan from Candidate
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 260000.00	

SUBTOTAL of Receipts This Page (optional).....	110000.00
TOTAL This Period (last page this line number only).....	140000.00

**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 11 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 475.40
City Carol Stream	State IL	Zip Code 60197-6416
Purpose of Disbursement phones	Category/ Type 001	
Candidate Name	Transaction ID : VPENEA0M8B3	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	-10/23/15
State: District:		

Full Name (Last, First, Middle Initial) B. Duquesne Light		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address Payment Processing Ctr		Amount of Each Disbursement this Period 123.58
City Pittsburgh	State PA	Zip Code 15267-0001
Purpose of Disbursement utility	Category/ Type 001	
Candidate Name	Transaction ID : VPENEA02081	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Duquesne Light		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address Payment Processing Ctr		Amount of Each Disbursement this Period 108.10
City Pittsburgh	State PA	Zip Code 15267-0001
Purpose of Disbursement utility	Category/ Type 001	
Candidate Name	Transaction ID : VPENEA0M8C1	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	707.08
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Duquesne Light		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address Payment Processing Ctr		Amount of Each Disbursement this Period 3110.10 Transaction ID : VPENEA0R288
City Pittsburgh	State PA	
Zip Code 15267-0001	Purpose of Disbursement utility	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Ference & Associates Properties LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 409 Broad St Ste 260		Amount of Each Disbursement this Period 1500.00 Transaction ID : VPENE9ZZTR0
City Sewickley	State PA	
Zip Code 15143-1558	Purpose of Disbursement Rent - October 2015	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Invoice

Full Name (Last, First, Middle Initial) C. Ference & Associates Properties LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 409 Broad St Ste 260		Amount of Each Disbursement this Period 1500.00 Transaction ID : VPENEA0A230
City Sewickley	State PA	
Zip Code 15143-1558	Purpose of Disbursement Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Invoice 277

SUBTOTAL of Disbursements This Page (optional).....	3110.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Ference & Associates Properties LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 409 Broad St Ste 260		Amount of Each Disbursement this Period 1600.00
City Sewickley State PA Zip Code 15143-1558	Purpose of Disbursement Rent	
Candidate Name	Category/Type 001	Transaction ID : VPENEA0KXW6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Dec 2015	
State: District:		

Full Name (Last, First, Middle Initial) B. Daniel J Fox		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 3662 Green Garden Rd		Amount of Each Disbursement this Period 1000.00
City Aliquippa State PA Zip Code 15001-1028	Purpose of Disbursement design	
Candidate Name	Category/Type 004	Transaction ID : VPENEA0PDS1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. LA HARRIS & ASSOCS LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 100 Bleu Brook Dr		Amount of Each Disbursement this Period 3500.00
City Harrodsburg State KY Zip Code 40330-2239	Purpose of Disbursement Payment for Political Consulting	
Candidate Name	Category/Type 001	Transaction ID : VPENEA0F8Z1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. LA HARRIS & ASSOCS LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2015
Mailing Address 100 Bleu Brook Dr		Amount of Each Disbursement this Period 1107.54
City Harrodsburg State KY Zip Code 40330-2239	Purpose of Disbursement Travel Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VPENEA0KXV8
State: District:		

Full Name (Last, First, Middle Initial) B. Steven B Larchuk		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2015
Mailing Address 1609 Stone Mansion Dr		Amount of Each Disbursement this Period 2341.81
City Sewickley State PA Zip Code 15143-8600	Purpose of Disbursement Group Expense Reimbursement Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VPENEA0E9C7
State: District:		

Full Name (Last, First, Middle Initial) c. Cort Furniture Rental		Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2015
Mailing Address 1201 Brighton Rd		Amount of Each Disbursement this Period 366.45
City Pittsburgh State PA Zip Code 15233-1601	Purpose of Disbursement Furniture Rental for Campaign Manager's Apartment Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VPENEA0EAC8 [MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3449.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Cort Furniture Rental		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address 1201 Brighton Rd		Amount of Each Disbursement this Period 366.45
City Pittsburgh	State PA	
Zip Code 15233-1601	Purpose of Disbursement Furniture Rental for Campaign Manager's Apartment	Transaction ID : VPENEA0EA61
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Cort Furniture Rental		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 1201 Brighton Rd		Amount of Each Disbursement this Period 366.45
City Pittsburgh	State PA	
Zip Code 15233-1601	Purpose of Disbursement Rental of Furniture for Campaign Manager's Apartment	Transaction ID : VPENEA0E9J3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. Cort Furniture Rental		Date of Disbursement MM / DD / YYYY 10 / 02 / 2015
Mailing Address 1201 Brighton Rd		Amount of Each Disbursement this Period 366.45
City Pittsburgh	State PA	
Zip Code 15233-1601	Purpose of Disbursement Rental Furniture for Campaign Manager's Apartment	Transaction ID : VPENEA0EAM1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. FedEx Office		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address 2638 Brandt School Rd		Amount of Each Disbursement this Period 000,000.00 108.34
City Wexford	State PA	
Zip Code 15090-7646	Purpose of Disbursement Printed Materials/Banners/A Frame	Transaction ID : VPENEA0EAF2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Giant Eagle Market District		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 100 Settlers Pike		Amount of Each Disbursement this Period 000,000.00 50.00
City Pittsburgh	State PA	
Zip Code 15233	Purpose of Disbursement Food/Beverages for Campaign Event	Transaction ID : VPENEA0E9K1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. Office Max		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address 2201 Park Manor Blvd		Amount of Each Disbursement this Period 000,000.00 22.99
City Pittsburgh	State PA	
Zip Code 15205-4819	Purpose of Disbursement Office Supplies - paper	Transaction ID : VPENEA0E9P4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 2201 Park Manor Blvd		Amount of Each Disbursement this Period 111.21
City Pittsburgh	State PA	
Zip Code 15205-4819	Purpose of Disbursement Office Supplies Paper and Folders	Transaction ID : VPENEA0E9N6
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Office Max		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 2201 Park Manor Blvd		Amount of Each Disbursement this Period 25.98
City Pittsburgh	State PA	
Zip Code 15205-4819	Purpose of Disbursement Envelopes for Campaign Mailings	Transaction ID : VPENEA0E9D5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. United States Postal Service		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address 521 Thorn St		Amount of Each Disbursement this Period 20.04
City Sewickley	State PA	
Zip Code 15143-1532	Purpose of Disbursement Postage and Mailings for Campaign Materials	Transaction ID : VPENEA0EAB0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2015
Mailing Address 521 Thorn St		Amount of Each Disbursement this Period 96.60
City Sewickley	State PA	
Zip Code 15143-1532	Purpose of Disbursement Postage and Mailings for Campaign Materials	Transaction ID : VPENEA0EA45
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2015
Mailing Address 521 Thorn St		Amount of Each Disbursement this Period 74.06
City Sewickley	State PA	
Zip Code 15143-1532	Purpose of Disbursement Postage for Campaign Mailings	Transaction ID : VPENEA0E9H5
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 521 Thorn St		Amount of Each Disbursement this Period 35.42
City Sewickley	State PA	
Zip Code 15143-1532	Purpose of Disbursement Postage and Mailings for Campaign Materials	Transaction ID : VPENEA0EA11
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address 521 Thorn St		Amount of Each Disbursement this Period 64.24
City Sewickley	State PA	
Zip Code 15143-1532	Purpose of Disbursement Postage and Mailings Costs	Transaction ID : VPENEA0E9Q2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Brian S Malkin		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 2374 Nevin Dr		Amount of Each Disbursement this Period 73.60
City Pittsburgh	State PA	
Zip Code 15237-1615	Purpose of Disbursement Reimbursement	Transaction ID : VPENEA0NDB4
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Marty Marks		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 7230 Meade St		Amount of Each Disbursement this Period 3800.00
City Pittsburgh	State PA	
Zip Code 15208-2502	Purpose of Disbursement Consulting	Transaction ID : VPENEA0ETT3
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3873.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. NGP VAN, INC.		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 2100.00
City Washington	State DC	
Zip Code 20005-5006	Purpose of Disbursement software	Transaction ID : VPENEA0M1H8
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	quarterly fees for last quarter of 2015
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 70.90
City Pittsburgh	State PA	
Zip Code 15276-0130	Purpose of Disbursement Payroll Charge	Transaction ID : VPENEA0EGW6
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 1854.76
City Pittsburgh	State PA	
Zip Code 15276-0130	Purpose of Disbursement payroll	Transaction ID : VPENEA0G151
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4025.66
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : VPENEA0M1H8

quarterly fee for NGP at \$550.00 per month quarterly fee for Online Contributions at \$150.00 per month Invoice #99253 reflects 3 months of service as of the invoice date of 12.1.15

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Brian S Malkin		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 2374 Nevin Dr		Amount of Each Disbursement this Period 303.33
City Pittsburgh	State PA	Zip Code 15237-1615
Purpose of Disbursement for payroll 10/2/2015		Transaction ID : VPENEA0G169
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Julie A Sayer		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 3189 Shelley Dr		Amount of Each Disbursement this Period 342.02
City South Park	State PA	Zip Code 15129-8884
Purpose of Disbursement for 10/2/2015 payroll		Transaction ID : VPENEA0G177
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Bruce Spector		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 3201 Waterford Landing		Amount of Each Disbursement this Period 1209.41
City Moon Township	State PA	Zip Code 15108
Purpose of Disbursement for 10/2/2015 payroll		Transaction ID : VPENEA0G185
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 625.36
City Pittsburgh	State PA	Zip Code 15276-0130
Purpose of Disbursement Taxes	Category/Type 001	
Candidate Name		Transaction ID : VPENEA0G192
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Department of Labor and Industry		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address Office Of Uc Tax Services Labor and Industry Building		Amount of Each Disbursement this Period 1.59
City Harrisburg	State PA	Zip Code 17121-0001
Purpose of Disbursement employee withholdings for 10/2/2015	Category/Type	
Candidate Name		Transaction ID : VPENEA0G1E2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
		[MEMO ITEM] *

Full Name (Last, First, Middle Initial) c. Department of Labor and Industry		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address Office Of Uc Tax Services Labor and Industry Building		Amount of Each Disbursement this Period 27.08
City Harrisburg	State PA	Zip Code 17121-0001
Purpose of Disbursement Employer liabilities for 10/2/2015 pay	Category/Type	
Candidate Name		Transaction ID : VPENEA0G1M9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
		[MEMO ITEM] *

SUBTOTAL of Disbursements This Page (optional).....	625.36
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : VPENEA0G192

Employee withholdings of \$419.85 Employer Liabilities \$205.51

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 141.03
City Hartford	State CT	Zip Code 06176-7008
Purpose of Disbursement employee withholdings 10/2/2015		Transaction ID : VPENEA0G1A0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 32.99
City Hartford	State CT	Zip Code 06176-7008
Purpose of Disbursement employee withholdings for 10/2/2015		Transaction ID : VPENEA0G1B8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 141.02
City Hartford	State CT	Zip Code 06176-7008
Purpose of Disbursement employer liabilities for 10/2/2015 pay		Transaction ID : VPENEA0G1H6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 32.99
City Hartford	State CT	
Zip Code 06176-7008		
Purpose of Disbursement Employer liabilities for 10/2/2015 pay		Category/ Type
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) B. IRS		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 145.67
City Hartford	State CT	
Zip Code 06176-7008		
Purpose of Disbursement employee withholdings for 10/2/2015		Category/ Type
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) C. Keystone Municipal Collections		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 546 Wendel Rd		Amount of Each Disbursement this Period 22.74
City Irwin	State PA	
Zip Code 15642-7539		
Purpose of Disbursement employee withholdings for 10/2/2015		Category/ Type
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Pennsylvania Department of Revenue		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address Bureau Of Business Trust Fund Taxe PO Box 280904		Amount of Each Disbursement this Period 69.83
City Harrisburg State PA Zip Code 17128-0001	Purpose of Disbursement employee withholdings for 10/2/2015	Transaction ID : VPENEA0G1D4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 2167.69
City Pittsburgh State PA Zip Code 15276-0130	Purpose of Disbursement payroll	Transaction ID : VPENEA0G1P5
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Brian S Malkin		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 2374 Nevin Dr		Amount of Each Disbursement this Period 303.34
City Pittsburgh State PA Zip Code 15237-1615	Purpose of Disbursement pay for 10/16/2015	Transaction ID : VPENEA0G1Q3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2167.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Julie A Sayer		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 3189 Shelley Dr		Amount of Each Disbursement this Period 654.95
City South Park	State PA	Zip Code 15129-8884
Purpose of Disbursement for 10/16/2015 pay	Category/ Type	Transaction ID : VPENEA0G1R9
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] *
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Bruce Spector		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 3201 Waterford Landing		Amount of Each Disbursement this Period 1209.40
City Moon Township	State PA	Zip Code 15108
Purpose of Disbursement for 10/16/2015 pay	Category/ Type	Transaction ID : VPENEA0G1V3
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] *
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 83.90
City Pittsburgh	State PA	Zip Code 15276-0130
Purpose of Disbursement Payroll Charge	Category/ Type	Transaction ID : VPENEA0EHM6
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	83.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 713.90
City Pittsburgh	State PA	Zip Code 15276-0130
Purpose of Disbursement Taxes	Category/Type 001	
Candidate Name		Transaction ID : VPENEA0G1W1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Department of Labor and Industry		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address Office Of Uc Tax Services Labor and Industry Building		Amount of Each Disbursement this Period 1.85
City Harrisburg	State PA	Zip Code 17121-0001
Purpose of Disbursement employee withholdings for 10/16/15 pay	Category/Type	
Candidate Name		Transaction ID : VPENEA0G210
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
		[MEMO ITEM] *

Full Name (Last, First, Middle Initial) c. Department of Labor and Industry		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address Office Of Uc Tax Services Labor and Industry Building		Amount of Each Disbursement this Period 40.32
City Harrisburg	State PA	Zip Code 17121-0001
Purpose of Disbursement Employer liabilities for 10/15/15 payroll	Category/Type	
Candidate Name		Transaction ID : VPENEA0G3W6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
		[MEMO ITEM] *

SUBTOTAL of Disbursements This Page (optional).....	713.90
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : VPENEA0G1W1

Employee withholdings of \$466.92 Employer Liabilities \$246.98

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 163.34
City Hartford	State CT	Zip Code 06176-7008
Purpose of Disbursement Employer liabilities for 10/15/15 pay		Transaction ID : VPENEA0G3P9
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 38.21
City Hartford	State CT	Zip Code 06176-7008
Purpose of Disbursement Employer liabilities for 10/15/15 payroll		Transaction ID : VPENEA0G3S2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 163.35
City Hartford	State CT	Zip Code 06176-7008
Purpose of Disbursement employee withholdings for 10/16/15 pay		Transaction ID : VPENEA0G1X8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 38.20
City Hartford State CT Zip Code 06176-7008	Purpose of Disbursement employee withholdings for 10/16/2015 pay	
Candidate Name		Transaction ID : VPENEA0G1Y6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. IRS		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 150.29
City Hartford State CT Zip Code 06176-7008	Purpose of Disbursement employee withholdings for 10/16/15 pay	
Candidate Name		Transaction ID : VPENEA0G1Z4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Keystone Municipal Collections		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 546 Wendel Rd		Amount of Each Disbursement this Period 26.34
City Irwin State PA Zip Code 15642-7539	Purpose of Disbursement Employee withholdings for 10/15/15 payroll	
Candidate Name		Transaction ID : VPENEA0G3K5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Pennsylvania Department of Revenue		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address Bureau Of Business Trust Fund Taxe PO Box 280904		Amount of Each Disbursement this Period 80.89
City Harrisburg State PA Zip Code 17128-0001	Purpose of Disbursement Employee withholdings for 10/15/15 pay	Transaction ID : VPENEA0G202
Candidate Name	Category/Type	[MEMO ITEM] *
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 70.90
City Pittsburgh State PA Zip Code 15276-0130	Purpose of Disbursement Payroll Charge	Transaction ID : VPENEA0EHN4
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 2155.98
City Pittsburgh State PA Zip Code 15276-0130	Purpose of Disbursement payroll	Transaction ID : VPENEA0G4N4
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2226.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Brian S Malkin		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 2374 Nevin Dr		Amount of Each Disbursement this Period 303.34
City Pittsburgh	State PA	
Zip Code 15237-1615	Purpose of Disbursement for 10/30/2015 pay	[MEMO ITEM] *
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Julie A Sayer		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 3189 Shelley Dr		Amount of Each Disbursement this Period 643.23
City South Park	State PA	
Zip Code 15129-8884	Purpose of Disbursement for 10/30/2015 payroll	[MEMO ITEM] *
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Bruce Spector		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 3201 Waterford Landing		Amount of Each Disbursement this Period 1209.41
City Moon Township	State PA	
Zip Code 15108	Purpose of Disbursement For 10/30/2015 payroll	[MEMO ITEM] *
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 705.88
City Pittsburgh	State PA	Zip Code 15276-0130
Purpose of Disbursement Taxes	Category/Type 001	
Candidate Name		Transaction ID : VPENEA0G4S5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Department of Labor and Industry		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address Office Of Uc Tax Services Labor and Industry Building		Amount of Each Disbursement this Period 1.83
City Harrisburg	State PA	Zip Code 17121-0001
Purpose of Disbursement Employee withholdings for 10/30/2015 pay	Category/Type	
Candidate Name		Transaction ID : VPENEA0G4Y3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
		[MEMO ITEM] *

Full Name (Last, First, Middle Initial) C. Department of Labor and Industry		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address Office Of Uc Tax Services Labor and Industry Building		Amount of Each Disbursement this Period 39.77
City Harrisburg	State PA	Zip Code 17121-0001
Purpose of Disbursement Employer liabilities for 10/30/2015 pay	Category/Type	
Candidate Name		Transaction ID : VPENEA0G566
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
		[MEMO ITEM] *

SUBTOTAL of Disbursements This Page (optional).....	705.88
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VPENEA0G4S5

Employee withholdings of \$463.63 Employer Liabilities \$242.25

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 162.41
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement Employer Liabilities for 10/30/2015 pay	Transaction ID : VPENEA0G4T3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 37.99
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement Employee withholdings for 10/30/15 pay	Transaction ID : VPENEA0G4V1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 162.41
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement Employee withholdings for 10/30/2015	Transaction ID : VPENEA0G516
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 37.99
City Hartford State CT Zip Code 06176-7008	Category/Type	
Purpose of Disbursement Employer liabilities for 10/30/2015 pay		Transaction ID : VPENEA0G540 [MEMO ITEM] *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. IRS		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 148.79
City Hartford State CT Zip Code 06176-7008	Category/Type	
Purpose of Disbursement Employee withholdings for 10/30/2015 pay		Transaction ID : VPENEA0G4W7 [MEMO ITEM] *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. Keystone Municipal Collections		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 546 Wendel Rd		Amount of Each Disbursement this Period 26.19
City Irwin State PA Zip Code 15642-7539	Category/Type	
Purpose of Disbursement Employee withholdings for 10/30/2015 pay		Transaction ID : VPENEA0G509 [MEMO ITEM] *
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Pennsylvania Department of Revenue		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address Bureau Of Business Trust Fund Taxe PO Box 280904		Amount of Each Disbursement this Period 80.42
City Harrisburg State PA Zip Code 17128-0001	Purpose of Disbursement Employee withholdings for 10/30/15 pay	Transaction ID : VPENEA0G4X5
Candidate Name	Category/Type	[MEMO ITEM] *
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 2285.01
City Pittsburgh State PA Zip Code 15276-0130	Purpose of Disbursement Direct Deposit Payroll	Transaction ID : VPENEA0M8M4
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Brian S Malkin		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 2374 Nevin Dr		Amount of Each Disbursement this Period 303.34
City Pittsburgh State PA Zip Code 15237-1615	Purpose of Disbursement pay	Transaction ID : VPENEA0M8N2
Candidate Name	Category/Type	[MEMO ITEM] *
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2285.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Julie A Sayer			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 3189 Shelley Dr			Amount of Each Disbursement this Period 772.27
City South Park	State PA	Zip Code 15129-8884	
Purpose of Disbursement pay		Category/ Type	Transaction ID : VPENEA0M8P0
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State:	District:		

Full Name (Last, First, Middle Initial) B. Bruce Spector			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 3201 Waterford Landing			Amount of Each Disbursement this Period 1209.40
City Moon Township	State PA	Zip Code 15108	
Purpose of Disbursement pay		Category/ Type	Transaction ID : VPENEA0M8Q8
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State:	District:		

Full Name (Last, First, Middle Initial) c. Paychex			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 5 Penn Ctr W Ste 500			Amount of Each Disbursement this Period 70.90
City Pittsburgh	State PA	Zip Code 15276-0130	
Purpose of Disbursement payroll charges		Category/ Type 001	Transaction ID : VPENEA0M8K6
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	70.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 760.54
City Pittsburgh	State PA Zip Code 15276-0130	
Purpose of Disbursement Combined Taxes for payroll	Category/Type 001	Transaction ID : VPENEA0M8T2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Department of Labor and Industry		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address Office Of Uc Tax Services Labor and Industry Building		Amount of Each Disbursement this Period 1.95
City Harrisburg	State PA Zip Code 17121-0001	
Purpose of Disbursement withholdings	Category/Type	Transaction ID : VPENEA0M8Z1
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. Department of Labor and Industry		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address Office Of Uc Tax Services Labor and Industry Building		Amount of Each Disbursement this Period 45.84
City Harrisburg	State PA Zip Code 17121-0001	
Purpose of Disbursement liabilities	Category/Type	Transaction ID : VPENEA0M959
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	760.54
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : VPENEA0M8T2

Employee withholdings of \$499.60 Employer Liabilities \$260.94

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 40.38
City Hartford	State CT	Zip Code 06176-7008
Purpose of Disbursement withholdings	Category/ Type	
Candidate Name	Transaction ID : VPENEA0M8W8	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 172.64
City Hartford	State CT	Zip Code 06176-7008
Purpose of Disbursement withholdings	Category/ Type	
Candidate Name	Transaction ID : VPENEA0M925	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 40.38
City Hartford	State CT	Zip Code 06176-7008
Purpose of Disbursement liabilities	Category/ Type	
Candidate Name	Transaction ID : VPENEA0M933	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 172.65
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement withholdings	Transaction ID : VPENEA0M8V0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. IRS		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 165.29
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement withholdings	Transaction ID : VPENEA0M8X5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. Keystone Municipal Collections		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 546 Wendel Rd		Amount of Each Disbursement this Period 27.84
City Irwin	State PA	
Zip Code 15642-7539	Purpose of Disbursement withholdings	Transaction ID : VPENEA0M917
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Pennsylvania Department of Revenue		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address Bureau Of Business Trust Fund Taxe PO Box 280904		Amount of Each Disbursement this Period 85.49
City Harrisburg	State PA Zip Code 17128-0001	
Purpose of Disbursement withholdings	Candidate Name	Transaction ID : VPENEA0M8Y3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 70.90
City Pittsburgh	State PA Zip Code 15276-0130	
Purpose of Disbursement payroll charges	Candidate Name	Transaction ID : VPENEA0M8J9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 2303.65
City Pittsburgh	State PA Zip Code 15276-0130	
Purpose of Disbursement Direct Deposit Payroll	Candidate Name	Transaction ID : VPENEA0M967
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	2374.55
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Brian S Malkin		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 2374 Nevin Dr		Amount of Each Disbursement this Period 303.34
City Pittsburgh	State PA	
Zip Code 15237-1615	Purpose of Disbursement pay	Transaction ID : VPENEA0M974
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Julie A Sayer		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 3189 Shelley Dr		Amount of Each Disbursement this Period 748.80
City South Park	State PA	
Zip Code 15129-8884	Purpose of Disbursement pay	Transaction ID : VPENEA0M982
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Bruce Spector		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 3201 Waterford Landing		Amount of Each Disbursement this Period 1209.42
City Moon Township	State PA	
Zip Code 15108	Purpose of Disbursement pay	Transaction ID : VPENEA0M990
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Christine Spector		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 3201 Waterford Landing		Amount of Each Disbursement this Period 42.09
City Moon Township	State PA	
Zip Code 15108	Purpose of Disbursement pay	Transaction ID : VPENEA0M9A8
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 736.88
City Pittsburgh	State PA	
Zip Code 15276-0130	Purpose of Disbursement Combined Taxes for payroll	Transaction ID : VPENEA0M9B6
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Department of Labor and Industry		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2015
Mailing Address Office Of Uc Tax Services Labor and Industry Building		Amount of Each Disbursement this Period 1.97
City Harrisburg	State PA	
Zip Code 17121-0001	Purpose of Disbursement withholdings	Transaction ID : VPENEA0M9G6
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	736.88
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VPENEA0M9B6

Employee withholdings of \$500.96 Employer Liabilities \$235.92

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement					
A. Department of Labor and Industry		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> </tr> <tr> <td>11 / 27 / 2015</td> </tr> </table>	M M / D D / Y Y Y Y	11 / 27 / 2015			
M M / D D / Y Y Y Y							
11 / 27 / 2015							
Mailing Address Office Of Uc Tax Services Labor and Industry Building		Amount of Each Disbursement this Period					
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Harrisburg</td> <td>PA</td> <td>17121-0001</td> </tr> </table>			City	State	Zip Code	Harrisburg	PA
City	State	Zip Code					
Harrisburg	PA	17121-0001					
Purpose of Disbursement liabilities		<table border="1"> <tr> <td>Amount</td> </tr> <tr> <td>18.98</td> </tr> </table>	Amount	18.98			
Amount							
18.98							
Candidate Name		Transaction ID : VPENEA0M9P3					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]					
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		*					
State: District:	Category/Type						

Full Name (Last, First, Middle Initial)		Date of Disbursement					
B. Internal Revenue Service		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> </tr> <tr> <td>11 / 25 / 2015</td> </tr> </table>	M M / D D / Y Y Y Y	11 / 25 / 2015			
M M / D D / Y Y Y Y							
11 / 25 / 2015							
Mailing Address PO Box 37008		Amount of Each Disbursement this Period					
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Hartford</td> <td>CT</td> <td>06176-7008</td> </tr> </table>			City	State	Zip Code	Hartford	CT
City	State	Zip Code					
Hartford	CT	06176-7008					
Purpose of Disbursement withholdings		<table border="1"> <tr> <td>Amount</td> </tr> <tr> <td>40.67</td> </tr> </table>	Amount	40.67			
Amount							
40.67							
Candidate Name		Transaction ID : VPENEA0M9D2					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]					
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		*					
State: District:	Category/Type						

Full Name (Last, First, Middle Initial)		Date of Disbursement					
C. Internal Revenue Service		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> </tr> <tr> <td>11 / 27 / 2015</td> </tr> </table>	M M / D D / Y Y Y Y	11 / 27 / 2015			
M M / D D / Y Y Y Y							
11 / 27 / 2015							
Mailing Address PO Box 37008		Amount of Each Disbursement this Period					
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Hartford</td> <td>CT</td> <td>06176-7008</td> </tr> </table>			City	State	Zip Code	Hartford	CT
City	State	Zip Code					
Hartford	CT	06176-7008					
Purpose of Disbursement withholdings		<table border="1"> <tr> <td>Amount</td> </tr> <tr> <td>173.88</td> </tr> </table>	Amount	173.88			
Amount							
173.88							
Candidate Name		Transaction ID : VPENEA0M9C4					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]					
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		*					
State: District:	Category/Type						

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>Amount</td> </tr> <tr> <td>0.00</td> </tr> </table>	Amount	0.00
Amount			
0.00			
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td>Amount</td> </tr> <tr> <td></td> </tr> </table>	Amount	
Amount			

**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 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 173.88
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement liabilities	[MEMO ITEM] *
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 40.68
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement liabilities	[MEMO ITEM] *
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. IRS		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 162.29
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement withholdings	[MEMO ITEM] *
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 2830.02
City Pittsburgh	State PA Zip Code 15276-0130	
Purpose of Disbursement Direct Deposit Payroll	Category/Type 001	Transaction ID : VPENEA0R2B2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Brian S Malkin		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address 2374 Nevin Dr		Amount of Each Disbursement this Period 303.34
City Pittsburgh	State PA Zip Code 15237-1615	
Purpose of Disbursement pay	Category/Type	Transaction ID : VPENEA0R2C0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Julie A Sayer		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address 3189 Shelley Dr		Amount of Each Disbursement this Period 630.93
City South Park	State PA Zip Code 15129-8884	
Purpose of Disbursement pay	Category/Type	Transaction ID : VPENEA0R2D8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2830.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Zachary Schwartz		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address 1210 Squirrel Hill Ave		Amount of Each Disbursement this Period 686.34
City Pittsburgh	State PA	Zip Code 15217-1148
Purpose of Disbursement pay	Category/Type	
Candidate Name	Transaction ID : VPENEA0R2E6	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] *	

Full Name (Last, First, Middle Initial) B. Bruce Spector		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address 3201 Landing Ln		Amount of Each Disbursement this Period 1209.41
City Moon Township	State PA	Zip Code 15108-4606
Purpose of Disbursement pay	Category/Type	
Candidate Name	Transaction ID : VPENEA0R2F3	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] *	

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 1096.35
City Pittsburgh	State PA	Zip Code 15276-0130
Purpose of Disbursement Combined Taxes for payroll	Category/Type 001	
Candidate Name	Transaction ID : VPENEA0R2G1	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1096.35
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : VPENEA0R2G1

Employee withholdings of \$752.67 Employer Liabilities \$343.68

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Department of Labor and Industry		M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address Office Of Uc Tax Services Labor and Industry Building		Amount of Each Disbursement this Period
City Harrisburg	State PA	Zip Code 17121-0001
Purpose of Disbursement withholdings	Category/ Type	
Candidate Name	Transaction ID : VPENEA0R2N1	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] *	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Department of Labor and Industry		M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address Office Of Uc Tax Services Labor and Industry Building		Amount of Each Disbursement this Period
City Harrisburg	State PA	Zip Code 17121-0001
Purpose of Disbursement liabilities	Category/ Type	
Candidate Name	Transaction ID : VPENEA0R2V8	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] *	

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Internal Revenue Service		M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period
City Hartford	State CT	Zip Code 06176-7008
Purpose of Disbursement withholdings	Category/ Type	
Candidate Name	Transaction ID : VPENEA0R2J7	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] *	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 234.52
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement withholdings	Transaction ID : VPENEA0R2H9
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 234.52
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement liabilities	Transaction ID : VPENEA0R2R5
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 54.85
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement liabilities	Transaction ID : VPENEA0R2S2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. IRS		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 280.24
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement withholdings	Transaction ID : VPENEA0R2K5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Keystone Municipal Collections		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 546 Wendel Rd		Amount of Each Disbursement this Period 56.28
City Irwin	State PA	
Zip Code 15642-7539	Purpose of Disbursement withholdings	Transaction ID : VPENEA0R2Q7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. Pennsylvania Department of Revenue		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address Bureau Of Business Trust Fund Tax PO Box 280904		Amount of Each Disbursement this Period 116.13
City Harrisburg	State PA	
Zip Code 17128-0001	Purpose of Disbursement withholdings	Transaction ID : VPENEA0R2M3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 70.90
City Pittsburgh	State PA Zip Code 15276-0130	
Purpose of Disbursement payroll charges	Category/Type 001	Transaction ID : VPENEA0R270
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address 5 Penn Ctr W Ste 500		Amount of Each Disbursement this Period 3288.07
City Pittsburgh	State PA Zip Code 15276-0130	
Purpose of Disbursement Direct Deposit Payroll	Category/Type 001	Transaction ID : VPENEA0R2W6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Brian S Malkin		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address 2374 Nevin Dr		Amount of Each Disbursement this Period 303.34
City Pittsburgh	State PA Zip Code 15237-1615	
Purpose of Disbursement pay	Category/Type	Transaction ID : VPENEA0R2X4
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3358.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Julie A Sayer		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address 3189 Shelley Dr		Amount of Each Disbursement this Period 540.49
City South Park	State PA	
Zip Code 15129-8884	Purpose of Disbursement pay	Transaction ID : VPENEA0R2Y2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Zachary Schwartz		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address 1210 Squirrel Hill Ave		Amount of Each Disbursement this Period 1170.67
City Pittsburgh	State PA	
Zip Code 15217-1148	Purpose of Disbursement pay	Transaction ID : VPENEA0R2Z0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Bruce Spector		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address 3201 Landing Ln		Amount of Each Disbursement this Period 1209.41
City Coraopolis	State PA	
Zip Code 15108-4606	Purpose of Disbursement pay	Transaction ID : VPENEA0R308
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Christine Spector			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015	
Mailing Address 3201 Waterford Landing			Amount of Each Disbursement this Period 64.16	
City Moon Township	State PA	Zip Code 15108	Transaction ID : VPENEA0R316	
Purpose of Disbursement pay		Category/ Type	[MEMO ITEM]	
Candidate Name			*	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Paychex			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015	
Mailing Address 5 Penn Ctr W Ste 500			Amount of Each Disbursement this Period 1309.59	
City Pittsburgh	State PA	Zip Code 15276-0130	Transaction ID : VPENEA0R324	
Purpose of Disbursement Combined Taxes for payroll		Category/ Type	[MEMO ITEM]	
Candidate Name			*	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Department of Labor and Industry			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015	
Mailing Address Office Of Uc Tax Services Labor and Industry Building			Amount of Each Disbursement this Period 2.93	
City Harrisburg	State PA	Zip Code 17121-0001	Transaction ID : VPENEA0R399	
Purpose of Disbursement withholdings		Category/ Type	[MEMO ITEM]	
Candidate Name			*	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1309.59
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : VPENEA0R324

Employee withholdings of \$901.93 Employer Liabilities \$407.66

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement					
A. Department of Labor and Industry		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>12 / 24 / 2015</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		12 / 24 / 2015	
M M / D D / Y Y Y Y							
12 / 24 / 2015							
Mailing Address Office Of Uc Tax Services Labor and Industry Building		Amount of Each Disbursement this Period					
City Harrisburg State PA Zip Code 17121-0001		<table border="1"> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td>74.91</td> </tr> </table>					74.91
	74.91						
Purpose of Disbursement liabilities		Transaction ID : VPENEA0R3J0					
Candidate Name		[MEMO ITEM]					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		*					
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)							
State: District:							

Full Name (Last, First, Middle Initial)		Date of Disbursement					
B. Internal Revenue Service		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>12 / 24 / 2015</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		12 / 24 / 2015	
M M / D D / Y Y Y Y							
12 / 24 / 2015							
Mailing Address PO Box 37008		Amount of Each Disbursement this Period					
City Hartford State CT Zip Code 06176-7008		<table border="1"> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td>259.78</td> </tr> </table>					259.78
	259.78						
Purpose of Disbursement wihholdings		Transaction ID : VPENEA0R331					
Candidate Name		[MEMO ITEM]					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		*					
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)							
State: District:							

Full Name (Last, First, Middle Initial)		Date of Disbursement					
c. Internal Revenue Service		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>12 / 24 / 2015</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		12 / 24 / 2015	
M M / D D / Y Y Y Y							
12 / 24 / 2015							
Mailing Address PO Box 37008		Amount of Each Disbursement this Period					
City Hartford State CT Zip Code 06176-7008		<table border="1"> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td>60.77</td> </tr> </table>					60.77
	60.77						
Purpose of Disbursement withholdings		Transaction ID : VPENEA0R357					
Candidate Name		[MEMO ITEM]					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		*					
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)							
State: District:							

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td>0.00</td> </tr> </table>				0.00
	0.00				
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </table>				

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 259.77
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement liabilities	Transaction ID : VPENEA0R3E8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 60.76
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement liabilities	Transaction ID : VPENEA0R3G4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. IRS		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address PO Box 37008		Amount of Each Disbursement this Period 365.62
City Hartford	State CT	
Zip Code 06176-7008	Purpose of Disbursement withholdings	Transaction ID : VPENEA0R365
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Keystone Municipal Collections			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address 546 Wendel Rd			Amount of Each Disbursement this Period 74.20
City Irwin	State PA	Zip Code 15642-7539	
Purpose of Disbursement withholdigs		Candidate Name	Transaction ID : VPENEA0R3C3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	[MEMO ITEM] *
State:	District:		

Full Name (Last, First, Middle Initial) B. Pennsylvania Department of Revenue			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2015
Mailing Address Bureau Of Business Trust Fund Taxe PO Box 280904			Amount of Each Disbursement this Period 128.63
City Harrisburg	State PA	Zip Code 17128-0001	
Purpose of Disbursement withholdings		Candidate Name	Transaction ID : VPENEA0R373
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	[MEMO ITEM] *
State:	District:		

Full Name (Last, First, Middle Initial) C. PEOPLES NATURAL GAS COMPANY			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address PO Box 644760			Amount of Each Disbursement this Period 34.09
City Pittsburgh	State PA	Zip Code 15264-4760	
Purpose of Disbursement utility		Candidate Name	Transaction ID : VPENEA0M8D9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type 001	utility
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	34.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. PEOPLES NATURAL GAS COMPANY			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address PO Box 644760			Amount of Each Disbursement this Period 43.35
City Pittsburgh	State PA	Zip Code 15264-4760	Transaction ID : VPENEA0R296
Purpose of Disbursement utility	Category/ Type 001		
Candidate Name			utility
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Print & Copy Center, Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 731 Allegheny River Blvd			Amount of Each Disbursement this Period 1077.49
City Verona	State PA	Zip Code 15147-1301	Transaction ID : VPENEA0FCW6
Purpose of Disbursement printing	Category/ Type 004		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Julie A Sayer			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 3189 Shelley Dr			Amount of Each Disbursement this Period 200.00
City South Park	State PA	Zip Code 15129-8884	Transaction ID : VPENEA0R2A4
Purpose of Disbursement pay	Category/ Type 001		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1320.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Julie A Sayer		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 3189 Shelley Dr		Amount of Each Disbursement this Period 410.00
City South Park	State PA	
Zip Code 15129-8884	Purpose of Disbursement pay	Transaction ID : VPENEA0PDR3
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Bruce Spector		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 3201 Waterford Landing		Amount of Each Disbursement this Period 127.91
City Moon Township	State PA	
Zip Code 15108	Purpose of Disbursement Group Reimbursement Item - office supplies, mailings,	Transaction ID : VPENEA0E8Z5
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Office Max		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 2201 Park Manor Blvd		Amount of Each Disbursement this Period 74.15
City Pittsburgh	State PA	
Zip Code 15205-4819	Purpose of Disbursement color address labels	Transaction ID : VPENEA0E910
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	537.91
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 2201 Park Manor Blvd		Amount of Each Disbursement this Period 4.99
City Pittsburgh	State PA	
Zip Code 15205-4819	Purpose of Disbursement mouse pad	Transaction ID : VPENEA0E928
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Office Max		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 2201 Park Manor Blvd		Amount of Each Disbursement this Period 27.80
City Pittsburgh	State PA	
Zip Code 15205-4819	Purpose of Disbursement address lables	Transaction ID : VPENEA0E936
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. Office Max		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 2201 Park Manor Blvd		Amount of Each Disbursement this Period 15.79
City Pittsburgh	State PA	
Zip Code 15205-4819	Purpose of Disbursement office supplies - paper	Transaction ID : VPENEA0E944
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 2201 Park Manor Blvd		Amount of Each Disbursement this Period 1.46
City Pittsburgh	State PA	
Zip Code 15205-4819	Purpose of Disbursement tax on October 1, 2015 office supplies order	Transaction ID : VPENEA0E952
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 521 Thorn St		Amount of Each Disbursement this Period 3.72
City Sewickley	State PA	
Zip Code 15143-1532	Purpose of Disbursement post office book mailing	Transaction ID : VPENEA0E960
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Bruce Spector		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 3201 Waterford Landing		Amount of Each Disbursement this Period 276.60
City Moon Township	State PA	
Zip Code 15108	Purpose of Disbursement Group Expense Reimbursement	Transaction ID : VPENEA0KXX4
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	276.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 97			
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 2201 Park Manor Blvd		Amount of Each Disbursement this Period 208.12
City Pittsburgh	State PA	
Zip Code 15205-4819	Purpose of Disbursement office supplies	Transaction ID : VPENEA0KXY2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 521 Thorn St		Amount of Each Disbursement this Period 3.22
City Sewickley	State PA	
Zip Code 15143-1532	Purpose of Disbursement mailing	Transaction ID : VPENEA0KY23
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2015
Mailing Address 521 Thorn St		Amount of Each Disbursement this Period 3.22
City Sewickley	State PA	
Zip Code 15143-1532	Purpose of Disbursement mailing	Transaction ID : VPENEA0KY31
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 97	
	<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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2015
Mailing Address 521 Thorn St		Amount of Each Disbursement this Period 3.22
City Sewickley	State PA	
Zip Code 15143-1532	Purpose of Disbursement mailing	Transaction ID : VPENEA0KY49
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 521 Thorn St		Amount of Each Disbursement this Period 3.22
City Sewickley	State PA	
Zip Code 15143-1532	Purpose of Disbursement mailing	Transaction ID : VPENEA0KY15
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Seth Tongchinsub		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 111 Fallowfield Ave		Amount of Each Disbursement this Period 800.00
City Charleroi	State PA	
Zip Code 15022-1402	Purpose of Disbursement advertising	Transaction ID : VPENEA0M8G3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	45652.55

**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 71 OF 97			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Larchuk for a Better Congress, Inc.

A. Full Name (Last, First, Middle Initial) International Brotherhood of Boilermakers Local 154 Campaign Assistance Fund		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015	
Mailing Address 1221 Banksville Rd			
City Pittsburgh State PA Zip Code 15216-3009			
Purpose of Disbursement reviewed and not a federal pac	Amount of Each Disbursement this Period 500.00		
Candidate Name	Transaction ID : VPENEA0BCZ0		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

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

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

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00

**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 72 OF 97
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" 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)
Larchuk for a Better Congress, Inc.

Full Name (Last, First, Middle Initial) A. Allegheny County Democratic Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2015
Mailing Address 429 Forbes Ave Ste 1301		Amount of Each Disbursement this Period 1000.00 Transaction ID : VPENEA02073
City Pittsburgh State PA Zip Code 15219-1625	Purpose of Disbursement Tickets/Contribution/Event 011 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Quaker Valley Democratic Organization		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address		Amount of Each Disbursement this Period 920.00 Transaction ID : VPENEA0M8F5
City State Zip Code	Purpose of Disbursement event sponsorship/food/tickets 011 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Westmoreland County Democratic Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address PO Box 266		Amount of Each Disbursement this Period 650.00 Transaction ID : VPENEA077F1
City Greensburg State PA Zip Code 15601-0266	Purpose of Disbursement event sponsorship/food/tickets 011 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	for Banquet on November 11, 2015
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2570.00
TOTAL This Period (last page this line number only).....	2570.00

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPDKHEY5L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

40000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

40000.00

TERMS

Date Incurred

02 / 28 / 2015

Date Due

none

Interest Rate

none % (apr)

Secured:

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

40000.00

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

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

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

NAME OF COMMITTEE (In Full) **Larchuk for a Better Congress, Inc.** Transaction ID : **VPFMPDKHEZ3L**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2016
Steven B Larchuk Primary
 Mailing Address 1609 Stone Mansion Dr General
 Other (specify) ▼

City State ZIP Code
 Sewickley PA 15143-8600

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

TERMS Date Incurred Date Due Interest Rate Secured:
 M M / D D / Y Y Y Y M M / D D / Y Y Y Y none % (apr) Yes No
 03 / 26 / 2015 none

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPDMDZX5L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 04 /

D 23 /

Y 2015 Y

M /

D /

Y none Y

none % (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPDME058L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 05 /

D 06 /

Y 2015 Y

M /

D /

Y none Y

none % (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPDME090L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary
 General
 Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000.00

0.00

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 05 /

D 15 /

Y 2015 Y

M /

D /

Y none Y

none % (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full) **Larchuk for a Better Congress, Inc.** Transaction ID : **VPFMPDNWBC0L**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2016
Steven B Larchuk
 Primary
General
 Other (specify) ▼

Mailing Address
1609 Stone Mansion Dr
City State ZIP Code
Sewickley PA 15143-8600

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

TERMS Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y none % (apr) Yes No
05 / 29 / 2015 none

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

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

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPDRZ993L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 06 /

D 08 /

Y 2015 Y

M /

D /

Y none Y

none % (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

10000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPDW0C45L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

06

17

2015

none

none

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPDXB1V0L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
06 / 18 / 2015

M M / D D / Y Y Y Y
06 / 18 / 2015

M M / D D / Y Y Y Y
06 / 18 / 2015

M M / D D / Y Y Y Y
none

M M / D D / Y Y Y Y
none

M M / D D / Y Y Y Y
none

none % (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPDYXD63L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

MM / DD / YYYY
06 / 24 / 2015

Date Due

MM / DD / YYYY
none

Interest Rate

none % (apr)

Secured:

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPEA0BK6L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000.00

0.00

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 07 M

D 02 D

Y 2015 Y

M M

D D

Y none Y

none % (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPER6JG5L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

M 08 / D 05 / Y 2015 Y

Date Due

M / D / Y none Y Y Y

Interest Rate

none % (apr)

Secured:

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPEWK1G2L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

MM / DD / YYYY
08 / 18 / 2015

Date Due

MM / DD / YYYY
none

Interest Rate

none % (apr)

Secured:

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full) **Larchuk for a Better Congress, Inc.** Transaction ID : **VPFMPFFBGT8L**

LOAN SOURCE Full Name (Last, First, Middle Initial) Steven B Larchuk	[PERSONAL FUNDS]	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1609 Stone Mansion Dr		

City Sewickley	State PA	ZIP Code 15143-8600
-------------------	-------------	------------------------

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

TERMS

Date Incurred M 08 / D 20 / Y 2015	Date Due M / D / Y none	Interest Rate none % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	----------------------------	-------------------------------	---

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

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

SUBTOTALS This Period This Page (optional).....	5000.00
TOTALS This Period (last page in this line only).....	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPEXCPX5L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09

18

2015

none

none

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPFRVTK0L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

MM / DD / YYYY
09 / 30 / 2015

Date Due

MM / DD / YYYY
none

Interest Rate

none % (apr)

Secured:

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPGACA20L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 11 /

D 07 /

Y 2015 Y

M M /

D D /

Y none Y Y

none % (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPG5QR11L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

M 11 / D 13 / Y 2015 Y

Date Due

M / D / Y none Y Y Y

Interest Rate

none % (apr)

Secured:

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : VPFMPG678W5L
Larchuk for a Better Congress, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) Steven B Larchuk	[PERSONAL FUNDS]	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1609 Stone Mansion Dr		

City	State	ZIP Code
Sewickley	PA	15143-8600

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

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 11 / D 16 / Y 2015	M M / D D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPG70XT9L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 11 M

D 19 D

Y 2015 Y

M M

D D

Y none Y

none

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPG7TDY2L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 11 /

D 24 /

Y 2015 Y

M /

D /

Y none Y

none % (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPGAAD22L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

M 12 / D 01 / Y 2015 Y

Date Due

M / D / Y none Y Y Y

Interest Rate

none

% (apr)

Secured:

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPGCP2B7L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M

D 03 D

Y 2015 Y

M M

D D

Y none Y

none % (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPFMPGCP2C5L

Larchuk for a Better Congress, Inc.

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

[PERSONAL FUNDS]

Election: 2016

Steven B Larchuk

Primary

General

Other (specify) ▼

Mailing Address

1609 Stone Mansion Dr

City

State

ZIP Code

Sewickley

PA

15143-8600

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M

D 04 D

Y 2015 Y

M M

D D

Y none Y

none % (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

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

NAME OF COMMITTEE (In Full) Transaction ID : VPFMPGB2S32L
Larchuk for a Better Congress, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) Steven B Larchuk	[PERSONAL FUNDS]	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1609 Stone Mansion Dr		

City	State	ZIP Code
Sewickley	PA	15143-8600

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 18 / Y 2015	M / D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="100000.00"/>
TOTALS This Period (last page in this line only).....	<input style="width: 100%;" type="text" value="260000.00"/>

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