

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Crowley for Congress

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))....	48653.67	2276901.79
(b) Total Contribution Refunds (from Line 20(d))	785.00	16887.93
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	47868.67	2260013.86
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	51665.71	1966350.32
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2516.68
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	51665.71	1963833.64
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1300808.10	
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).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Crowley for Congress

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).....	4641.67	688850.35
(ii) Unitemized.....	12.00	22464.67
(iii) TOTAL of contributions from individuals ▶	4653.67	711315.02
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	44000.00	1565586.77
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	48653.67	2276901.79
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	588914.16
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	2516.68
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	33172.33
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	48653.67	2901504.96

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	51665.71	1966350.32
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	785.00	9056.64
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	7831.29
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	785.00	16887.93
21. OTHER DISBURSEMENTS	77200.00	574887.04
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	129650.71	2558125.29

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1381805.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	48653.67
25. SUBTOTAL (add Line 23 and Line 24).....	1430458.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	129650.71
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1300808.10

**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 47
	<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)
Crowley for Congress

A. Full Name (Last, First, Middle Initial)
Charles Callahan II

Mailing Address 9 Arleigh Road

City Little Neck State NY Zip Code 11363

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

Name of Employer Plaza College Occupation Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : C10331908

Amount of Each Receipt this Period
1000.00

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

Mailing Address 9 Arleigh Road

City Little Neck State NY Zip Code 11363

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

Name of Employer Plaza College Occupation Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : C10331909

Amount of Each Receipt this Period
1000.00

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

Mailing Address 8612 Tebbs Lane

City McLean State VA Zip Code 22102

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
208.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2014

Transaction ID : C10400738A

Amount of Each Receipt this Period
41.67

* Earmarked Contribution: See Below

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

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

2041.67

**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 47
	<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)
Crowley for Congress

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2653.67

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 07 / 2014

Transaction ID : C10400738AB

Amount of Each Receipt this Period
41.67

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

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

Mailing Address 259 E 7th Street - PH

City State Zip Code
New York NY 10009

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2014

Transaction ID : C10400737A

Amount of Each Receipt this Period
2600.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2653.67

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2014

Transaction ID : C10400737AB

Amount of Each Receipt this Period
2600.00

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

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

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

2600.00

4641.67

**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 47
	<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)
Crowley for Congress

A. Full Name (Last, First, Middle Initial)
American Bankers Association PAC

Mailing Address 1120 Connecticut Ave NW

City Washington State DC Zip Code 20036-3902

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 01 / 2014

Transaction ID : C10331101

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
AXA Equitable Life Assurance Society PAC

Mailing Address 1290 Avenue of the Americas
Attn: Wendy Cooper

City New York State NY Zip Code 10104-0101

FEC ID number of contributing federal political committee. **C C00161901**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2014

Transaction ID : C10350234

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Bristol Myers Squibb PAC

Mailing Address 345 Park Ave

City New York State NY Zip Code 10154-0004

FEC ID number of contributing federal political committee. **C C00035675**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2014

Transaction ID : C10355841

Amount of Each Receipt this Period
1000.00

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

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

11000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 47
	<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)
Crowley for Congress

A. Full Name (Last, First, Middle Initial)
BUILD Political Action Committee

Mailing Address of the National Assn. of Home Buil
Bobby Rayburn, 2000 Chairman

City Washington State DC Zip Code 20005-2800

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2014

Transaction ID : C10341493

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
CELGENE CORPORATION PAC

Mailing Address 86 MORRIS AVENUE

City SUMMIT State NJ Zip Code 07901

FEC ID number of contributing federal political committee. **C** C00514331

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2014

Transaction ID : C10331355

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
CONSUMER HEALTHCARE PRODUCTS ASSOCIATION PAC (CHPA/PAC)

Mailing Address 900 19TH STREET, NW
SUITE 700

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00040584

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2014

Transaction ID : C10331900

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 9 OF 47
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Crowley for Congress

A. Full Name (Last, First, Middle Initial)
Financial Services Roundtable PAC

Mailing Address 805 15th St NW

City Washington State DC Zip Code 20005-2207

FEC ID number of contributing federal political committee. **C C00193177**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2014

Transaction ID : C10331103

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
FMR CORP. POLITICAL ACTION COMMITTEE-FEDERAL

Mailing Address 82 Devonshire St

City Boston State MA Zip Code 02109-3605

FEC ID number of contributing federal political committee. **C C00380550**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2014

Transaction ID : C10331100

Amount of Each Receipt this Period
 3500.00

C. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTE

Mailing Address 1299 Pennsylvania Ave NW
Ste 1100

City Washington State DC Zip Code 20004-2414

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2014

Transaction ID : C10341484

Amount of Each Receipt this Period
 1500.00

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

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

7500.00

**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 47
	<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)
Crowley for Congress

A. Full Name (Last, First, Middle Initial)
LOEWS CORPORATION PUBLIC AFFAIRS COMMITTEE

Mailing Address **667 MADISON AVENUE**
ATT: CORPORATE SECRETARY

City **NEW YORK** State **NY** Zip Code **10021**

FEC ID number of contributing federal political committee. **C C00416495**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 01 / 2014

Transaction ID : C10331914

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
MEDTRONIC INC. MEDICAL TECHNOLOGY FUND

Mailing Address **1420 New York Ave NW**
Ste 600

City **Washington** State **DC** Zip Code **20005-6203**

FEC ID number of contributing federal political committee. **C C00311878**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 08 / 2014

Transaction ID : C10350233

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address **1717 RHODE ISLAND AVE NW**
SUITE 400

City **WASHINGTON** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00004812**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 01 / 2014

Transaction ID : C10331107

Amount of Each Receipt this Period
5000.00

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

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

9000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 47
	<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)
Crowley for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

Mailing Address 1771 N St NW

City Washington State DC Zip Code 20036-2800

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 01 / 2014

Transaction ID : C10331363

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
NOVO NORDISK POLITICAL ACTION COMMITTEE

Mailing Address 1155 F STREET NW
SUITE 1150

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00424838

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 10 / 2014

Transaction ID : C10358043

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
OPTIONS CLEARING CORPORATION POLITICAL ACTION COMM

Mailing Address 1 N Wacker Dr
Ste 500

City Chicago State IL Zip Code 60606-2818

FEC ID number of contributing federal political committee. **C** C00255877

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 01 / 2014

Transaction ID : C10331102

Amount of Each Receipt this Period
1000.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 47
<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)
Crowley for Congress

A. Full Name (Last, First, Middle Initial)
PENNEYPAC - J.C.PENNEY CORP. INC. POLITICAL ACTION

Mailing Address 6501 Legacy Dr
Plano

City State Zip Code
Plano TX 75024-3612

FEC ID number of contributing federal political committee. **C C00042895**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 01 / 2014

Transaction ID : C10331105

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
ST. PAUL TRAVELERS COMPANIES INC. POLITICAL ACTION

Mailing Address 1 Tower Sq

City State Zip Code
Hartford CT 06183-0001

FEC ID number of contributing federal political committee. **C C00376376**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 01 / 2014

Transaction ID : C10331368

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 600 13th St NW
Ste 340

City State Zip Code
Washington DC 20005-3012

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 03 / 2014

Transaction ID : C10341482

Amount of Each Receipt this Period
2000.00

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

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

6500.00

44000.00

**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 13 OF 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address P.O. Box 382110		Amount of Each Disbursement this Period 0.24 Transaction ID : D499594
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Online contribution service charge	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address P.O. Box 382110		Amount of Each Disbursement this Period 103.99 Transaction ID : D499595
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Online contribution service charge	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. IRS		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address PO Box 416 United States Treasury		Amount of Each Disbursement this Period 3000.00 Transaction ID : D499775
City Newark	State NJ	
Zip Code 07101-0416	Purpose of Disbursement payroll taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3104.23
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 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. KYRSTEN SINEMA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address PO BOX 25879		Amount of Each Disbursement this Period 2000.00
City TEMPE State AZ Zip Code 85285	Purpose of Disbursement Contrib House AZ-09 Gen	Transaction ID : D499675
Candidate Name KYRSTEN SINEMA	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ District: 09		

Full Name (Last, First, Middle Initial) B. LGDCQ		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address PO Box 857		Amount of Each Disbursement this Period 350.00
City Jackson Heights State NY Zip Code 11372-0857	Purpose of Disbursement Advertisement & event tickets	Transaction ID : D499622
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. NAACP Parckchester Br.		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address PO Box 482		Amount of Each Disbursement this Period 295.00
City Bronx State NY Zip Code 10462-0482	Purpose of Disbursement Advertisement & event ticket	Transaction ID : D499625
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2645.00
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 15 OF 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Nirun Chawla		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 45-21 41st Street		Amount of Each Disbursement this Period 935.00 Transaction ID : D499699
City SunnySide	State NY Zip Code 11104	
Purpose of Disbursement Payroll	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Perkins Coie LLP		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 1201 3rd Ave		Amount of Each Disbursement this Period 1451.86 Transaction ID : D499635
City Seattle	State WA Zip Code 98101-3029	
Purpose of Disbursement Legal consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Petty Cash		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 8456 Grand Ave		Amount of Each Disbursement this Period 600.00 Transaction ID : D499598
City Elmhurst	State NY Zip Code 11373-4352	
Purpose of Disbursement Petty cash food/bev/travel/courier not over \$100	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2986.86
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 47			
	<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)
Crowley for Congress

A. Petty Cash

Full Name (Last, First, Middle Initial)

Mailing Address 8456 Grand Ave

City Elmhurst State NY Zip Code 11373-4352

Purpose of Disbursement
Petty cash food/bev/travel/courier not over \$100

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 06 / 2014

Amount of Each Disbursement this Period
600.00

Transaction ID : D499600

Category/Type

B. Queens Jewish Link

Full Name (Last, First, Middle Initial)

Mailing Address 147-24 69th Road

City Flushing State NY Zip Code 11367

Purpose of Disbursement
Advertisement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 01 / 2014

Amount of Each Disbursement this Period
300.00

Transaction ID : D499714

Category/Type

C. Retriever Payment Systems

Full Name (Last, First, Middle Initial)

Mailing Address 20405 State Highway 249
Ste 700

City Houston State TX Zip Code 77070-3815

Purpose of Disbursement
credit card processing charges

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 15 / 2014

Amount of Each Disbursement this Period
400.94

Transaction ID : D499774

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 1300.94

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 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. SHAREing and CAREing		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 4502 Ditmars Blvd		Amount of Each Disbursement this Period 150.00 Transaction ID : D499621
City Astoria State NY Zip Code 11105-1319	Purpose of Disbursement Advertisement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Signature Bank		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 78-27 37th Avenue		Amount of Each Disbursement this Period 5.25 Transaction ID : D499663
City Jackson Heights State NY Zip Code 11372	Purpose of Disbursement Bank service charge	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Signature Bank		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 78-27 37th Avenue		Amount of Each Disbursement this Period 5.25 Transaction ID : D499665
City Jackson Heights State NY Zip Code 11372	Purpose of Disbursement Bank service charge	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	160.50
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 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Studio Square		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 35-37 36th Street, 4th Fl.		Amount of Each Disbursement this Period 27563.75 Transaction ID : D499676
City Long Island City	State NY Zip Code 11106	
Purpose of Disbursement Food Beverage Deposit Holiday Party	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Conrad Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 426 C St NE		Amount of Each Disbursement this Period 737.37 Transaction ID : D499632
City Washington	State DC Zip Code 20002-5839	
Purpose of Disbursement Fundraising reimbursements	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Vaughn College		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 8211 37th Ave C O JIMMY SMITH		Amount of Each Disbursement this Period 250.00 Transaction ID : D499641
City Jackson Heights	State NY Zip Code 11372-7014	
Purpose of Disbursement Advertisement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	28551.12
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 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 225.09
City Albany	State NY	
Zip Code 12212-5124	Purpose of Disbursement Telephone	Transaction ID : D499615
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS CARD		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address P.O. Box 1270		Amount of Each Disbursement this Period 12566.97
City Newark	State NJ	
Zip Code 07101-1270	Purpose of Disbursement Credit card see below	Transaction ID : D499597
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Amazon.com		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 172 Trade St		Amount of Each Disbursement this Period 47.95
City Lexington	State KY	
Zip Code 40511-2607	Purpose of Disbursement Office supplies/beverages	Transaction ID : D499627 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12792.06
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 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. AMTRAK		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 60 Massachusetts Avenue NW		Amount of Each Disbursement this Period 152.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Campaign travel	
Candidate Name	Category/Type	Transaction ID : D499605 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AOL Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 770 Broadway		Amount of Each Disbursement this Period 33.99
City New York State NY Zip Code 10003	Purpose of Disbursement Internet service	
Candidate Name	Category/Type	Transaction ID : D499619 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ATT Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 208 S. Akard St.		Amount of Each Disbursement this Period 128.56
City Dallas State TX Zip Code 75202	Purpose of Disbursement Telephone	
Candidate Name	Category/Type	Transaction ID : D499701 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	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 21 OF 47	
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial)
A. Carey International Charter Services

Mailing Address 4530 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4627

Purpose of Disbursement Campaign travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 304.85

Transaction ID : D499633

[MEMO ITEM]

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

Mailing Address 4732 Bell Blvd

City Bayside State NY Zip Code 11361-3334

Purpose of Disbursement Plaques/awards

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 303.98

Transaction ID : D499644

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
c. Delicious on Lydig

Mailing Address 746 Lydig Avenue

City Bronx State NY Zip Code 10462

Purpose of Disbursement Food/beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 572.00

Transaction ID : D499705

[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 22 OF 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Delta Airlines			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 1030 Delta Boulevard			Amount of Each Disbursement this Period 426.10
City Atlanta	State GA	Zip Code 30354-1989	
Purpose of Disbursement Campaign travel		Category/ Type	Transaction ID : D499620 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Dollar Tree Store			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 2047 Bartow Avenue			Amount of Each Disbursement this Period 143.17
City Bronx	State NY	Zip Code 10475	
Purpose of Disbursement Event supplies		Category/ Type	Transaction ID : D499659 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Dunkin Doughnuts			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 2502 31st St			Amount of Each Disbursement this Period 8.54
City Astoria	State NY	Zip Code 11102	
Purpose of Disbursement Food/beverage		Category/ Type	Transaction ID : D499678 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional)	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 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Dunkin Doughnuts		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 2502 31st St		Amount of Each Disbursement this Period 10.92
City Astoria	State NY Zip Code 11102	
Purpose of Disbursement Food/beverage	Candidate Name	Transaction ID : D499679 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Dunkin Doughnuts		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 2502 31st St		Amount of Each Disbursement this Period 4.01
City Astoria	State NY Zip Code 11102	
Purpose of Disbursement Food/beverage	Candidate Name	Transaction ID : D499680 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Dunkin Doughnuts		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 2502 31st St		Amount of Each Disbursement this Period 8.02
City Astoria	State NY Zip Code 11102	
Purpose of Disbursement Food/beverage	Candidate Name	Transaction ID : D499681 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

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 24 OF 47	
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Dunkin Doughnuts		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 2502 31st St		Amount of Each Disbursement this Period 13.48
City Astoria	State NY Zip Code 11102	
Purpose of Disbursement Food/beverage	Candidate Name	Transaction ID : D499682
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Dunkin Doughnuts		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 2502 31st St		Amount of Each Disbursement this Period 34.82
City Astoria	State NY Zip Code 11102	
Purpose of Disbursement Food/beverage	Candidate Name	Transaction ID : D499683
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. E-Z Pass		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 1150 South Ave		Amount of Each Disbursement this Period 39.00
City Staten Island	State NY Zip Code 10314-3404	
Purpose of Disbursement Campaign travel	Candidate Name	Transaction ID : D499651
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[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 25 OF 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. E-Z Pass		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 1150 South Ave		Amount of Each Disbursement this Period 95.00
City Staten Island	State NY	
Zip Code 10314-3404	Purpose of Disbursement Campaign travel	Transaction ID : D499652
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Fame Restaurant		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 6967 Grand Ave		Amount of Each Disbursement this Period 30.20
City Maspeth	State NY	
Zip Code 11378-1863	Purpose of Disbursement Food/beverage	Transaction ID : D499630
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Fitzpatrick Grand		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 141 East 44th Street		Amount of Each Disbursement this Period 81.41
City New York	State NY	
Zip Code 10017	Purpose of Disbursement Food/beverage	Transaction ID : D499691
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial)
A. FTD Flowers

Mailing Address 3113 Woodcreek Dr

City Downers Grove State IL Zip Code 60515-5412

Purpose of Disbursement Flowers

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 104.73

Transaction ID : D499647

[MEMO ITEM]

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

Mailing Address 8655 Queens Blvd

City Elmhurst State NY Zip Code 11373-4427

Purpose of Disbursement Food/beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 14.76

Transaction ID : D499602

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
c. Home Depot

Mailing Address 13135 Avery Ave

City Flushing State NY Zip Code 11355-4930

Purpose of Disbursement Event/office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 55.08

Transaction ID : D499601

[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 27 OF 47	
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Jahn's		Date of Disbursement MM / DD / YYYY 10 / 08 / 2014
Mailing Address Jackson Heights, NY		Amount of Each Disbursement this Period 000,000.00 Transaction ID : D499611
City Jackson Heights	State NY	
Zip Code 11372	Purpose of Disbursement Food/beverage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Jerome Flowers		Date of Disbursement MM / DD / YYYY 10 / 08 / 2014
Mailing Address 3418 Jerome Ave		Amount of Each Disbursement this Period 000,000.00 Transaction ID : D499624
City Bronx	State NY	
Zip Code 10467-1002	Purpose of Disbursement Flowers	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Jet Blue Airlines		Date of Disbursement MM / DD / YYYY 10 / 08 / 2014
Mailing Address 11829 Queens Blvd		Amount of Each Disbursement this Period 000,000.00 Transaction ID : D499628
City Forest Hills	State NY	
Zip Code 11375-7212	Purpose of Disbursement Campaign travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

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 28 OF 47	
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. KOS Gas		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 78-29 Grand Avenue		Amount of Each Disbursement this Period 30.00
City Elmhurst	State NY	
Zip Code 11373	Purpose of Disbursement Campaign travel	Transaction ID : D499677
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Mei Wah		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 1200 New Hampshire Ave NW		Amount of Each Disbursement this Period 145.48
City Washington	State DC	
Zip Code 20036-6801	Purpose of Disbursement Food/beverage	Transaction ID : D499645
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Michael's Art & Supplies		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 51-06 Northern Boulevard		Amount of Each Disbursement this Period 92.53
City Woodside	State NY	
Zip Code 11377	Purpose of Disbursement Event supplies	Transaction ID : D499702
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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 29 OF 47	
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Nevada Diner		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 80-06 Queens Blvd.		Amount of Each Disbursement this Period 25.14
City Elmhurst	State NY	
Zip Code 11373	Purpose of Disbursement Food/beverage	Transaction ID : D499693 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. New York Yankees		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address E. 161st Street and River Avenue		Amount of Each Disbursement this Period 1395.00
City Bronx	State NY	
Zip Code 10451	Purpose of Disbursement Campaign event tickets	Transaction ID : D499649 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. NGP Software		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 5039 Connecticut Ave NW Ste 1A		Amount of Each Disbursement this Period 3120.00
City Washington	State DC	
Zip Code 20008-2056	Purpose of Disbursement Computer consulting/software	Transaction ID : D499616 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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 30 OF 47	
	<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)
Crowley for Congress

A. NGP Software

Full Name (Last, First, Middle Initial)
Mailing Address 5039 Connecticut Ave NW Ste 1A

City Washington State DC Zip Code 20008-2056

Purpose of Disbursement Computer consulting/software

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 30.00

Transaction ID : D499617

[MEMO ITEM]

B. Onstar

Full Name (Last, First, Middle Initial)
Mailing Address 400 Renaissance Ctr

City Detroit State MI Zip Code 48243-1607

Purpose of Disbursement Automobile expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 32.56

Transaction ID : D499650

[MEMO ITEM]

c. Paul's Service Station

Full Name (Last, First, Middle Initial)
Mailing Address 43-10 31st Avenue

City Astoria State NY Zip Code 11103

Purpose of Disbursement Campaign travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 41.00

Transaction ID : D499695

[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 31 OF 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Pret A Manager			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014		
Mailing Address 1432 K North West Street			Amount of Each Disbursement this Period 21.76		
City Washington	State DC	Zip Code 20533	Transaction ID : D499694		
Purpose of Disbursement Food/beverage		Category/ Type	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) B. Punjab Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014		
Mailing Address 67-02 Queens Blvd.			Amount of Each Disbursement this Period 39.01		
City Woodside	State NY	Zip Code 11377	Transaction ID : D499687		
Purpose of Disbursement Campaign travel		Category/ Type	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) c. Punjab Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014		
Mailing Address 67-02 Queens Blvd.			Amount of Each Disbursement this Period 37.00		
City Woodside	State NY	Zip Code 11377	Transaction ID : D499688		
Purpose of Disbursement Campaign travel		Category/ Type	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	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 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Queens Museum of Art			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 111th Street			Amount of Each Disbursement this Period 217.75
City Flushing	State NY	Zip Code 11368	
Purpose of Disbursement Plaque/award		Category/ Type	Transaction ID : D499643 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Rayburn Dining			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 45 Independence Ave SW			Amount of Each Disbursement this Period 36.00
City Washington	State DC	Zip Code 20024	
Purpose of Disbursement Food/beverage		Category/ Type	Transaction ID : D499689 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. Rite Aid			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 60-26 Woodside Avenue			Amount of Each Disbursement this Period 114.81
City Woodside	State NY	Zip Code 11377	
Purpose of Disbursement Event/office supplies		Category/ Type	Transaction ID : D499653 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	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 47	
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Rite Aid		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 60-26 Woodside Avenue		Amount of Each Disbursement this Period 18.75
City Woodside State NY Zip Code 11377	Category/Type	
Purpose of Disbursement Office supplies	Candidate Name	Transaction ID : D499654 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Shell		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 9210 Astoria Blvd		Amount of Each Disbursement this Period 58.01
City East Elmhurst State NY Zip Code 11369	Category/Type	
Purpose of Disbursement Campaign travel	Candidate Name	Transaction ID : D499655 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Shell		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 9210 Astoria Blvd		Amount of Each Disbursement this Period 50.02
City East Elmhurst State NY Zip Code 11369	Category/Type	
Purpose of Disbursement Campaign travel	Candidate Name	Transaction ID : D499656 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	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 34 OF 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Shell		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 9210 Astoria Blvd		Amount of Each Disbursement this Period 40.04
City East Elmhurst	State NY	
Zip Code 11369	Purpose of Disbursement Campaign travel	Transaction ID : D499657
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Shell		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 9210 Astoria Blvd		Amount of Each Disbursement this Period 32.39
City East Elmhurst	State NY	
Zip Code 11369	Purpose of Disbursement Campaign travel	Transaction ID : D499658
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 330 Baychester Ave		Amount of Each Disbursement this Period 17.19
City Bronx	State NY	
Zip Code 10475-4500	Purpose of Disbursement Event/office supplies	Transaction ID : D499609
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 330 Baychester Ave		Amount of Each Disbursement this Period 69.22
City Bronx	State NY	
Zip Code 10475-4500		
Purpose of Disbursement Event/office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Stop & Stor		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 7404 Grand Ave		Amount of Each Disbursement this Period 234.00
City Elmhurst	State NY	
Zip Code 11373-4127		
Purpose of Disbursement Storage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Sunrise Chevrolet		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 105-20 Gerard Place		Amount of Each Disbursement this Period 164.27
City Forest Hills	State NY	
Zip Code 11375		
Purpose of Disbursement Campaign automobile service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	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 36 OF 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address PO Box 371365		Amount of Each Disbursement this Period 147.36
City Pittsburgh	State PA	
Zip Code 15250-7365	Purpose of Disbursement Cable	Transaction ID : D499613
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. UPS		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address PO Box 7247		Amount of Each Disbursement this Period 33.25
City Philadelphia	State PA	
Zip Code 19170-0001	Purpose of Disbursement Courier	Transaction ID : D499606
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. UPS		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address PO Box 7247		Amount of Each Disbursement this Period 45.84
City Philadelphia	State PA	
Zip Code 19170-0001	Purpose of Disbursement Courier	Transaction ID : D499607
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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 37 OF 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. US Airways		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 426.00
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement Campaign travel	Transaction ID : D499638
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 25.00
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement Campaign travel	Transaction ID : D499639
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 485.00
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement Campaign travel	Transaction ID : D499640
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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 47	
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 5001 Junction Blvd		Amount of Each Disbursement this Period 490.00
City Elmhurst	State NY Zip Code 11373-2843	
Purpose of Disbursement Stamps for mailing	Candidate Name	Transaction ID : D499626
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address PO Box 15062 Attn: Jackie McCrocklin		Amount of Each Disbursement this Period 842.30
City Albany	State NY Zip Code 12212-5062	
Purpose of Disbursement Telephone	Candidate Name	Transaction ID : D499642
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
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).....	0.00
TOTAL This Period (last page this line number only).....	51540.71

**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 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Richard La Salle		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 8801 Roosevelt Ave FI 2		Amount of Each Disbursement this Period 300.00 Transaction ID : D499660
City Jackson Heights	State NY Zip Code 11372-7832	
Purpose of Disbursement Refund of excess contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Michael Mattone		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 9 Albertson Ln		Amount of Each Disbursement this Period 35.00 Transaction ID : D499718
City Old Westbury	State NY Zip Code 11568-1412	
Purpose of Disbursement Refund of excess contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Charles O'Byrne		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 450 E 20th St Apt 11G		Amount of Each Disbursement this Period 400.00 Transaction ID : D499719
City New York	State NY Zip Code 10009-8245	
Purpose of Disbursement Refund of excess contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	735.00
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 40 OF 47			
	<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)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Ms. Maura A. Wrynn		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 8 Hillside Ave.		Amount of Each Disbursement this Period 35.00
City Douglaston State NY Zip Code 11363	Purpose of Disbursement Refund of excess contribution	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D499720
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	35.00
TOTAL This Period (last page this line number only).....	770.00

**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 41 OF 47
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. BERA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address POST OFFICE BOX 582496		Amount of Each Disbursement this Period 2000.00 Transaction ID : D499666
City ELK GROVE	State CA	
Zip Code 95758	Purpose of Disbursement Contrib House CA-07 Gen	Category/ Type
Candidate Name AMERISH BERA	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 07	

Full Name (Last, First, Middle Initial) B. Bronx Columbus Day Parade		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 851 Van Nest Avenue		Amount of Each Disbursement this Period 1000.00 Transaction ID : D499618
City Bronx	State NY	
Zip Code 10462	Purpose of Disbursement Donation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Bronx Veterans Parade Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address PO Box 1601		Amount of Each Disbursement this Period 250.00 Transaction ID : D499646
City Bronx	State NY	
Zip Code 10451-1601	Purpose of Disbursement Donation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3250.00
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 42 OF 47	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. Church of St. Theresa		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 2855 Saint Theresa Ave		Amount of Each Disbursement this Period 200.00 Transaction ID : D499634
City Bronx	State NY	
Zip Code 10461-4152	Purpose of Disbursement Donation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 430 S. Capital Street SE		Amount of Each Disbursement this Period 50000.00 Transaction ID : D499684
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Contribution from excess campaign funds	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FRIENDS OF CHERI BUSTOS		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address P.O. BOX 77		Amount of Each Disbursement this Period 2000.00 Transaction ID : D499669
City EAST MOLINE	State IL	
Zip Code 61244	Purpose of Disbursement Contrib House IL-17 Gen	Category/ Type
Candidate Name CHERI BUSTOS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 17	

SUBTOTAL of Disbursements This Page (optional).....	52200.00
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 43 OF 47	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. FRIENDS OF PATRICK MURPHY		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 4521 PGA BLVD. #412		Amount of Each Disbursement this Period 2000.00
City PALM BEACH GARDENS	State FL	Zip Code 33418
Purpose of Disbursement Contrib House FL-18 Gen		Category/ Type
Candidate Name PATRICK MURPHY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 18	

Full Name (Last, First, Middle Initial) B. Friends of Toby Stavisky		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address PO Box 1547 STAVISKY POST		Amount of Each Disbursement this Period 500.00
City Flushing	State NY	Zip Code 11354-7547
Purpose of Disbursement Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. FRIENDS OF JOHN BARROW		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address PO BOX 1001		Amount of Each Disbursement this Period 2000.00
City AUGUSTA	State GA	Zip Code 30903
Purpose of Disbursement Contrib House GA-12 Gen		Category/ Type
Candidate Name JOHN J. BARROW		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: GA	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	4500.00
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 47
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. LOEBSACK FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address PO BOX 3013		Amount of Each Disbursement this Period 2000.00 Transaction ID : D499667
City IOWA CITY State IA Zip Code 52244	Purpose of Disbursement Contrib House IA-02 Gen	
Candidate Name DAVID WAYNE LOEBSACK	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 02		

Full Name (Last, First, Middle Initial) B. Mike Honda for Congress		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address C/O CONTRIBUTION SOLUTIONS, LLC 123 E. SAN CARLOS ST., #531		Amount of Each Disbursement this Period 1000.00 Transaction ID : D499612
City SAN JOSE State CA Zip Code 95112	Purpose of Disbursement Contrib House CA-17 Gen	
Candidate Name MIKE HONDA	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 17		

Full Name (Last, First, Middle Initial) c. Nolan 2014		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 60-70 Putnam Avenue		Amount of Each Disbursement this Period 250.00 Transaction ID : D498101
City Ridgewood State NY Zip Code 11385	Purpose of Disbursement Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3250.00
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 47	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address PO BOX 1041		Amount of Each Disbursement this Period 2000.00
City BRAINERD State MN Zip Code 56401	Purpose of Disbursement Contrib House MN-08 Gen	Transaction ID : D499671
Candidate Name RICHARD MICHAEL NOLAN	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 08		

Full Name (Last, First, Middle Initial) B. PERLMUTTER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 3440 YOUNGFIELD STREET #264		Amount of Each Disbursement this Period 2000.00
City WHEAT RIDGE State CO Zip Code 80033	Purpose of Disbursement Contrib House CO-07 Gen	Transaction ID : D499636
Candidate Name EDWIN G PERLMUTTER	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CO District: 07		

Full Name (Last, First, Middle Initial) C. RON BARBER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address PO BOX 57715		Amount of Each Disbursement this Period 2000.00
City TUCSON State AZ Zip Code 85732	Purpose of Disbursement Contrib House AZ-02 Gen	Transaction ID : D499672
Candidate Name RONALD BARBER	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ District: 02		

SUBTOTAL of Disbursements This Page (optional).....	6000.00
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 46 OF 47	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. SCHNEIDER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address PO BOX 1318		Amount of Each Disbursement this Period 2000.00 Transaction ID : D499673
City DEERFIELD State IL Zip Code 60015	Purpose of Disbursement Contrib House IL-10 Gen	
Candidate Name BRADLEY SCOTT SCHNEIDER		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL District: 10		

Full Name (Last, First, Middle Initial) B. SEAN PATRICK MALONEY FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 18 W MAIN ST		Amount of Each Disbursement this Period 2000.00 Transaction ID : D499674
City BEACON State NY Zip Code 12508	Purpose of Disbursement Contrib House NY-18 Gen	
Candidate Name SEAN PATRICK MALONEY		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 18		

Full Name (Last, First, Middle Initial) C. MOULTON FOR CONGRESS COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address PO BOX 2013		Amount of Each Disbursement this Period 2000.00 Transaction ID : D499715
City SALEM State MA Zip Code 01970	Purpose of Disbursement Contrib House MA-06 Gen	
Candidate Name SETH MOULTON		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MA District: 06		

SUBTOTAL of Disbursements This Page (optional).....	6000.00
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 47			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Crowley for Congress

Full Name (Last, First, Middle Initial) A. TIM BISHOP FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 129 Wooley St		Amount of Each Disbursement this Period 2000.00
City Southampton State NY Zip Code 11968-3436	Purpose of Disbursement Contrib House NY-01 Gen	
Candidate Name Tim Bishop	Category/Type	Transaction ID : D499623
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

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

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

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	77200.00