

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

MIKE KELLY FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 476

Check if different than previously reported. (ACC)

LYNDORA

PA

16045

2. **FEC IDENTIFICATION NUMBER** ▼

C C00474189

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

PA

03

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day **POST**-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y
11 / 04 / 2014

in the State of

PA

5. Covering Period

M M / D D / Y Y Y Y
10 / 16 / 2014

through

M M / D D / Y Y Y Y
11 / 24 / 2014

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

Type or Print Name of Treasurer Ann Coleman

Signature of Treasurer Ann Coleman

[Electronically Filed]

Date

M M / D D / Y Y Y Y
12 / 04 / 2014

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

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
MIKE KELLY 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))....	119505.40	1604609.80
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	119505.40	1604609.80
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	253368.12	1229440.73
(b) Total Offsets to Operating Expenditures (from Line 14).....	301.42	1755.73
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	253066.70	1227685.00
8. Cash on Hand at Close of Reporting Period (from Line 27).....	187981.22	
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).....	277995.00	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

MIKE KELLY FOR CONGRESS

Report Covering the Period: From: 10 / 16 / 2014 To: 11 / 24 / 2014

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 04 / 2014 (date of general election)	COLUMN C Total for 11 / 05 / 2014 (date after general election)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
25500.00	548843.47	7750.00
(ii) Unitemized		
2810.00	46669.08	220.00
(iii) Total of contributions from individuals		
28310.00	595512.55	7970.00
(b) Political Party Committees		
0.00	0.00	0.00
(c) Other Political Committees		
91195.40	1009097.25	10300.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 82

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
119505.40	1604609.80	18270.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	25219.72	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
301.42	1755.73	126.42
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.85	16.36	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
119807.67	1631601.61	18396.42

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 82

Write or Type Committee Name

MIKE KELLY FOR CONGRESS

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
253368.12	1229440.73	43018.68
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
0.00	198275.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
50000.00	2000.00	50000.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
50000.00	2000.00	50000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 82

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
-------------------------------	---	---

(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	0.00	0.00
------	------	------

21. OTHER DISBURSEMENTS

1165.00	15277.77	40.00
---------	----------	-------

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

304533.12	1444993.50	93058.68
-----------	------------	----------

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

119505.40	1604609.80	18270.00
-----------	------------	----------

IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

253066.70	1227685.00	42892.26
-----------	------------	----------

V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	372706.67
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	119807.67
25. SUBTOTAL (add Line 23 and Line 24).....	492514.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	304533.12
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	187981.22

**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 82
	<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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kathryn Coyle

Mailing Address 120 B Blosson Drive

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11AI.10146

Amount of Each Receipt this Period
500.00
contribution

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

Mailing Address 438 Chestnut Street

City State Zip Code
Meadville PA 16355

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

Name of Employer Occupation
Channellock, Inc President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 25 / 2014

Transaction ID : SA11AI.10154

Amount of Each Receipt this Period
500.00
contribution

C. Full Name (Last, First, Middle Initial)
J. Christopher Donahue

Mailing Address 1300 Beechwood Blvd

City State Zip Code
Pittsburgh PA 15216

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

Name of Employer Occupation
Federated Investors executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 08 / 2014

Transaction ID : SA11AI.10200

Amount of Each Receipt this Period
2500.00
contribution

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 8 OF 82
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Phil English

Mailing Address 530 W. 6th Street

City Erie State PA Zip Code 16507

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

Name of Employer Occupation
Arent Fox Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11AI.10136

Amount of Each Receipt this Period
 500.00
 contribution

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

Mailing Address 537 N Neville Street
Apt 2B

City Pittsburgh State PA Zip Code 15213

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

Name of Employer Occupation
Federated Securities Investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 08 / 2014

Transaction ID : SA11AI.10202

Amount of Each Receipt this Period
 2500.00
 contribution

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

Mailing Address 5717 Clinton Drive

City Erie State PA Zip Code 16509

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

Name of Employer Occupation
Village at Luther Square CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 08 / 2014

Transaction ID : SA11AI.10207

Amount of Each Receipt this Period
 500.00
 contribution

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

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

3500.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.10136

We will be writing a refund check to Phil English for the excess contribution of 150.00. Please note on following report.

Form/Schedule:

Transaction ID:

**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 82
	<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)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Robert Heakins		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2014	
Mailing Address 731 S. Aiken Avenue		Transaction ID : SA11AI.10026	
City Pittsburgh	State PA	Zip Code 15232	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 1000.00	
Name of Employer Oak Tree Investment Advisors	Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. Michael Hebor		Date of Receipt M M / D D / Y Y Y Y 11 / 10 / 2014	
Mailing Address 143 Rebecca Drive		Transaction ID : SA11AI.10210	
City Pittsburgh	State PA	Zip Code 15237	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period contribution 250.00	
Name of Employer Cabot Guns	Occupation Firearms manufacturer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Henry Hillman		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 5120 Hollywood Road		Transaction ID : SA11AI.10161	
City Pittsburgh	State PA	Zip Code 15213	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period contribution 500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 82
	<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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Thomas Kim

Mailing Address 7009 Arbor Lane

City McLean State VA Zip Code 22101

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

Name of Employer Thomas Capitol Partners Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3250.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 01 / 2014

Transaction ID : SA11AI.10217

Amount of Each Receipt this Period
 500.00
 contribution

B. Full Name (Last, First, Middle Initial)
Thomas King III

Mailing Address 128 W Cunningham Street

City Butler State PA Zip Code 16001

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

Name of Employer Dillon McCandless King Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11AI.10530

Amount of Each Receipt this Period
 1000.00
 Contribution

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

Mailing Address 4174 Four Seasons Trail

City Erie State PA Zip Code 16506

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2014

Transaction ID : SA11AI.10155

Amount of Each Receipt this Period
 50.00
 contribution

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

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

1550.00

**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 82
	<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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ronald Lewis

Mailing Address Fair Clairton Blvd

City Pittsburgh State PA Zip Code 15236

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

Name of Employer Ron Lewis Automotive Group Occupation Automobile Dealer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.10081

Amount of Each Receipt this Period
 Contribution 1000.00

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

Mailing Address 201 Gladstone Road

City Pittsburgh State PA Zip Code 15217

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

Name of Employer Quality Insurance Concepts Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.10094

Amount of Each Receipt this Period
 Contribution 2500.00

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

Mailing Address 180 Wedgewood Drive

City Gibsonia State PA Zip Code 15044

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

Name of Employer Self Employed Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.10082

Amount of Each Receipt this Period
 Contribution 2600.00

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

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

6100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 82
	<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)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ronald Novel		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2014	
Mailing Address 5401 Mystic Ridge		Transaction ID : SA11AI.9661	
City Erie	State PA	Zip Code 16506	Amount of Each Receipt this Period Contribution 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer XCell Tool and Mold	Occupation Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. David Phillips		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address 135 McElwaney Way		Transaction ID : SA11AI.10051	
City Fayetteville	State GA	Zip Code 30215	Amount of Each Receipt this Period Contribution 2400.00
FEC ID number of contributing federal political committee. C			
Name of Employer Fayette Co Board of Education	Occupation Educator		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2400.00		

Full Name (Last, First, Middle Initial) C. Timothy M. Schell		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address 201 B Erie Street		Transaction ID : SA11AI.10121	
City Grove City	State PA	Zip Code 16127	Amount of Each Receipt this Period contribution 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer TMS Physical Therapy	Occupation Physical Therapist		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

SUBTOTAL of Receipts This Page (optional).....	3600.00
TOTAL This Period (last page this line number only).....	3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 82
	<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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Joseph Suresky

Mailing Address 18 Brookside Drive

City Goshen State NY Zip Code 10924

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

Name of Employer RI Suresky & Sons, Inc. Occupation Auto Dealer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 10 / 2014

Transaction ID : SA11AI.10212

Amount of Each Receipt this Period
 1000.00
 contribution

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

Mailing Address 132 Andrew Trace

City Butler State PA Zip Code 16001

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2014

Transaction ID : SA11AI.10156

Amount of Each Receipt this Period
 500.00
 contribution

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

Mailing Address 1830 W 38th Avenue

City Denver State CO Zip Code 80211

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

Name of Employer Leprino Foods Occupation Vice Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : SA11AI.10183

Amount of Each Receipt this Period
 1000.00
 contribution

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 82
	<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)
MIKE KELLY FOR CONGRESS

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

Mailing Address 76 Vincent Circle

City State Zip Code
Ivyland PA 18974

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

Name of Employer Occupation
JBM Technologies President

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 / 23 / 2014

Transaction ID : SA11AI.10122

Amount of Each Receipt this Period
500.00
contribution

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

Mailing Address 4719 Glen Crest Dr

City State Zip Code
Erie PA 16509

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

Name of Employer Occupation
Smith's Provision Company Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11AI.10129

Amount of Each Receipt this Period
500.00
contribution

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

Mailing Address 6291 Stonebridge Dr

City State Zip Code
Fairview PA 16415

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

Name of Employer Occupation
Smith's Provision Company Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11AI.10127

Amount of Each Receipt this Period
500.00
contribution

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 82
	<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)
MIKE KELLY FOR CONGRESS

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

Mailing Address 1638 Backbone Road

City State Zip Code
Sewickley PA 15143

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

Name of Employer Occupation
Penn Energy Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 08 / 2014

Transaction ID : SA11AI.10205

Amount of Each Receipt this Period
1000.00
contribution

B. Full Name (Last, First, Middle Initial)
Wiley Rein LLP

Mailing Address 1776 K Street NW

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : SA11AI.10532

Amount of Each Receipt this Period
500.00
Contribution

C. Full Name (Last, First, Middle Initial)
R Scott Weaver

Mailing Address 1776 K Street NW

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation
Wiley Rein LLP Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : SA11AI.10532.0

Amount of Each Receipt this Period
500.00
Contribution

[MEMO ITEM]

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

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

1500.00

25500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 82
	<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	

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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALPHA NATURAL RESOURCES, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1301 PENNSYLVANIA AVE., NW
SUITE 404

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00348524**

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 / 20 / 2014

Transaction ID : SA11C.9675

Amount of Each Receipt this Period
 Contribution 1000.00

B. Full Name (Last, First, Middle Initial)
ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)

Mailing Address 101 CONSTITUTION AVE NW
SUITE 400W

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00089136**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : SA11C.10172

Amount of Each Receipt this Period
 contribution 1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE (SKINPAC)

Mailing Address 1445 NEW YORK AVENUE NW
STE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00359539**

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
 10 / 23 / 2014

Transaction ID : SA11C.10048

Amount of Each Receipt this Period
 Contribution 2500.00

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: (check only one)	PAGE 18 OF 82
	<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	

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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)

Mailing Address 1015 15TH ST. NW
SUITE 802

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00010868**

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
 11 / 03 / 2014

Transaction ID : SA11C.10180

Amount of Each Receipt this Period
 contribution 1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVE., NW
SUITE 700

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00147066**

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
 11 / 03 / 2014

Transaction ID : SA11C.10178

Amount of Each Receipt this Period
 contribution 2500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN GAS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 400 N. CAPITOL ST., NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00007450**

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 Y Y
 11 / 03 / 2014

Transaction ID : SA11C.10166

Amount of Each Receipt this Period
 contribution 2000.00

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 19 OF 82			
	<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

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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 325 SEVENTH STREET, NW
SUITE 700

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11C.10074

Amount of Each Receipt this Period
 Contribution 5000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN PODIATRIC MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 9312 OLD GEORGETOWN ROAD

City BETHESDA State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C C00008839**

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 / 20 / 2014

Transaction ID : SA11C.9676

Amount of Each Receipt this Period
 Contribution 5000.00

C. Full Name (Last, First, Middle Initial)
BARNES & THORNBURG POLITICAL ACTION COMMITTEE

Mailing Address 11 SOUTH MERIDIAN STREET

City INDIANAPOLIS State IN Zip Code 46204

FEC ID number of contributing federal political committee. **C C00395947**

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 Y Y
 10 / 23 / 2014

Transaction ID : SA11C.10044

Amount of Each Receipt this Period
 Contribution 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 20 OF 82
	<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	

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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BAYADA NURSES INC US POLITICAL ACTION COMMITTEE (AKA BAYADA US PAC)

Mailing Address **290 CHESTER AVENUE**

City **MOORESTOWN** State **NJ** Zip Code **08057**

FEC ID number of contributing federal political committee. **C C00485433**

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 / 22 / 2014
Transaction ID : SA11C.10028

Amount of Each Receipt this Period
2000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
BENTLEY SYSTEMS, INCORPORATED FEDERAL PAC

Mailing Address **685 STOCKTON DRIVE**

City **EXTON** State **PA** Zip Code **19341**

FEC ID number of contributing federal political committee. **C C00408138**

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 / 30 / 2014
Transaction ID : SA11C.10099

Amount of Each Receipt this Period
2500.00
 Contribution

C. Full Name (Last, First, Middle Initial)
CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGROUP PAC-FEDERAL)

Mailing Address **1101 PENNSYLVANIA AVENUE NW #1000**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00008474**

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 Y Y
11 / 03 / 2014
Transaction ID : SA11C.10167

Amount of Each Receipt this Period
1000.00
 contribution

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 82
	<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	

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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CONOCOPHILLIPS SPIRIT PAC

Mailing Address 720 N. PLAZA OFFICE BUILDING

City State Zip Code
BARTLESVILLE OK 74004

FEC ID number of contributing federal political committee. **C C00112896**

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
 11 / 03 / 2014

Transaction ID : SA11C.10164

Amount of Each Receipt this Period
 2000.00
 contribution

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

Mailing Address P.O. BOX 365

City State Zip Code
WASHINGTON DC 20044

FEC ID number of contributing federal political committee. **C C00211318**

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 Y
 10 / 26 / 2014

Transaction ID : SA11C.10068

Amount of Each Receipt this Period
 1000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
EMERSON ELECTRIC CO. RESPONSIBLE GOVERNMENT FUND

Mailing Address 8000 W FLORISSANT AVE
STATION 2310

City State Zip Code
ST. LOUIS MO 63136

FEC ID number of contributing federal political committee. **C C00080515**

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 Y
 10 / 31 / 2014

Transaction ID : SA11C.10107

Amount of Each Receipt this Period
 1000.00
 Contribution

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 82
	<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	

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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00105981

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 / 23 / 2014

Transaction ID : SA11C.10148

Amount of Each Receipt this Period
 500.00
 contribution

B. Full Name (Last, First, Middle Initial)
Thomas King III

Mailing Address 128 W Cunningham Street

City Butler	State PA	Zip Code 16001
----------------	-------------	-------------------

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

Name of Employer Dillon McCandless King	Occupation Attorney
--	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11C.10061

Amount of Each Receipt this Period
 1000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Thomas King III

Mailing Address 128 W Cunningham Street

City Butler	State PA	Zip Code 16001
----------------	-------------	-------------------

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

Name of Employer Dillon McCandless King	Occupation Attorney
--	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11C.10529

Amount of Each Receipt this Period
 -1000.00
 Contribution

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

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

500.00

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

Form/Schedule: SA11C

Transaction ID : SA11C.10529

Should entry should be listed on Individual 11a line. Because it was reported on 48 hr report on 11c we are correcting with the negative and moving to line 11a.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 24 OF 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LIUNA BUILDING AMERICA

Mailing Address 905 16TH STREET NW 2ND FLOOR

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C00568964**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : SA11C.10169

Amount of Each Receipt this Period
 5000.00
 contribution

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE SUITE 100

City State Zip Code
ARLINGTON VA 22202

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11C.9668

Amount of Each Receipt this Period
 1000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
MARKWEST ENERGY PARTNERS LP POLITICAL ACTION COMMITTEE

Mailing Address 1515 ARAPAHOE STREET TOWER 1, SUITE 1600

City State Zip Code
DENVER CO 80202

FEC ID number of contributing federal political committee. **C C00489468**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11C.10084

Amount of Each Receipt this Period
 1000.00
 Contribution

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

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

7000.00

**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 25 OF 82
	<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	

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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1295 STATE STREET

City State Zip Code
SPRINGFIELD MA 01111

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2014
Transaction ID : SA11C.10221

Amount of Each Receipt this Period
 5000.00
 contribution

B. Full Name (Last, First, Middle Initial)
MCDONALDS CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 2111 MCDONALDS DR DEPT 213

City State Zip Code
OAK BROOK IL 60523

FEC ID number of contributing federal political committee. **C** C00063164

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2014
Transaction ID : SA11C.10218

Amount of Each Receipt this Period
 2000.00
 contribution

C. Full Name (Last, First, Middle Initial)
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Mailing Address ONE POST STREET 34TH FLOOR

City State Zip Code
SAN FRANCISCO CA 94104

FEC ID number of contributing federal political committee. **C** C00108035

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 9000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014
Transaction ID : SA11C.10089

Amount of Each Receipt this Period
 4000.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 82
	<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	

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)
MIKE KELLY FOR CONGRESS

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

Mailing Address 1919 M STREET, NW
5TH FLOOR

City WASHINGTON State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 10 / 2014

Transaction ID : SA11C.10220

Amount of Each Receipt this Period
 2500.00
 contribution

B. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00238725**

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
 11 / 03 / 2014

Transaction ID : SA11C.10176

Amount of Each Receipt this Period
 2500.00
 contribution

C. Full Name (Last, First, Middle Initial)
NATIONAL ATHLETIC TRAINERS' ASSOCIATION INC POLITICAL ACTION COMMITTEE (NATA)

Mailing Address 2952 STEMMONS FREEWAY

City DALLAS State TX Zip Code 75247

FEC ID number of contributing federal political committee. **C C00408518**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : SA11C.10173

Amount of Each Receipt this Period
 1500.00
 contribution

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 82
	<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	

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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 KING STREET
SUITE 600

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00144766**

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 / 16 / 2014

Transaction ID : SA11C.9658

Amount of Each Receipt this Period
 Contribution 3500.00

B. Full Name (Last, First, Middle Initial)
NATIONAL FUEL GAS FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 6363 MAIN STREET

City WILLIAMSVILLE State NY Zip Code 14221

FEC ID number of contributing federal political committee. **C C00083758**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2014

Transaction ID : SA11C.10069

Amount of Each Receipt this Period
 Contribution 2000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL FUEL GAS FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 6363 MAIN STREET

City WILLIAMSVILLE State NY Zip Code 14221

FEC ID number of contributing federal political committee. **C C00083758**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2014

Transaction ID : SA11C.10223

Amount of Each Receipt this Period
 contribution 400.00

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

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

5900.00

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

Form/Schedule: SA11C

Transaction ID : SA11C.10069

It appears that National Fuel Gas has exceeded the federal limit of 5000.00 per cycle with this contribution. We will be refunding 100.00 so that this contribution is compliant.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 82
	<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	

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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL FUEL GAS FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 6363 MAIN STREET

City WILLIAMSVILLE State NY Zip Code 14221

FEC ID number of contributing federal political committee. **C C00083758**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 10 / 2014

Transaction ID : SA11C.10224

Amount of Each Receipt this Period
 400.00
 contribution

B. Full Name (Last, First, Middle Initial)
NATIONAL PRO-LIFE ALLIANCE PAC

Mailing Address 5211 PORT ROYAL ROAD SUITE 500

City SPRINGFIELD State VA Zip Code 22151

FEC ID number of contributing federal political committee. **C C00358051**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11C.10149

Amount of Each Receipt this Period
 500.00
 contribution

C. Full Name (Last, First, Middle Initial)
NATIONAL RURAL LETTER CARRIERS' ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1630 DUKE STREET 2ND FLOOR

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00072025**

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 / 26 / 2014

Transaction ID : SA11C.10071

Amount of Each Receipt this Period
 2000.00
 Contribution

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

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

2900.00

**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 30 OF 82
	<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	

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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC

Mailing Address 1605 KING STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00089458**

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 / 20 / 2014

Transaction ID : SA11C.9669

Amount of Each Receipt this Period
 _____ 4000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
NATIONAL TOOLING & MACHINING ASSOCIATION (NTMA) COMMITTEE FOR A STRONG ECONOMY

Mailing Address 6363 OAK TREE BLVD.

City INDEPENDENCE State OH Zip Code 44131

FEC ID number of contributing federal political committee. **C C00043091**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11C.10018

Amount of Each Receipt this Period
 _____ 2000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
NOVO NORDISK INC. PAC (NOVO NORDISK PAC)

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
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11C.10059

Amount of Each Receipt this Period
 _____ 1000.00
 Contribution

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

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

_____ 7000.00

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

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

FOR LINE NUMBER: PAGE 31 OF 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PRECISION MACHINED PRODUCTS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 6700 W. SNOWVILLE ROAD

City Brecksville State OH Zip Code 44141

FEC ID number of contributing federal political committee. **C** C00110858

Name of Employer Occupation C00110858

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11C.10017

Amount of Each Receipt this Period
 100.00
 Contribution

B. Full Name (Last, First, Middle Initial)
PRECISION MACHINED PRODUCTS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 6700 W. SNOWVILLE ROAD

City Brecksville State OH Zip Code 44141

FEC ID number of contributing federal political committee. **C** C00110858

Name of Employer Occupation C00110858

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11C.10514

Amount of Each Receipt this Period
 900.00
 contribution

C. Full Name (Last, First, Middle Initial)
PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

Mailing Address 6363 OAK TREE BLVD.

City Independence State OH Zip Code 44131

FEC ID number of contributing federal political committee. **C** C00082271

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 / 22 / 2014

Transaction ID : SA11C.10019

Amount of Each Receipt this Period
 1000.00
 Contribution

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 32 OF 82
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 WILSON BLVD
SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00097568**

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 / 20 / 2014

Transaction ID : SA11C.9667

Amount of Each Receipt this Period
Contribution 4000.00

B. Full Name (Last, First, Middle Initial)
REPUBLICAN OPERATION TO SECURE AND KEEP A MAJORITY (ROSKAM PAC)

Mailing Address P. O. BOX 1011

City WHEATON State IL Zip Code 60187

FEC ID number of contributing federal political committee. **C C00451294**

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 / 20 / 2014

Transaction ID : SA11C.9673

Amount of Each Receipt this Period
Contribution 5000.00

C. Full Name (Last, First, Middle Initial)
THE CATERPILLAR INC. EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address 100 N.E. ADAMS STREET

City PEORIA State IL Zip Code 61629

FEC ID number of contributing federal political committee. **C C00148031**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11C.10124

Amount of Each Receipt this Period
contribution 2000.00

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 33 OF 82
	<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	

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)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C C00064766**

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 / 23 / 2014

Transaction ID : SA11C.10046

Amount of Each Receipt this Period
 3000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00147173**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8604.60

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11C.10090

Amount of Each Receipt this Period
 2500.00
 Contribution

C. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00147173**

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
 11 / 03 / 2014

Transaction ID : SA11C.10181

Amount of Each Receipt this Period
 1395.40
 contribution

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

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

6895.40

91195.40

**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 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Acme		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 116 W. Streetboro Street		Amount of Each Disbursement this Period 147.00 Transaction ID : SB17.10286
City Hudson State OH Zip Code 44236	Purpose of Disbursement postage	
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. Acme		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 116 W. Streetboro Street		Amount of Each Disbursement this Period 139.47 Transaction ID : SB17.10378
City Hudson State OH Zip Code 44236	Purpose of Disbursement campaign event-food and beverage	
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. Acme		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 116 W. Streetboro Street		Amount of Each Disbursement this Period 49.00 Transaction ID : SB17.10379
City Hudson State OH Zip Code 44236	Purpose of Disbursement postage	
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).....	335.47
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 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Acme		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 116 W. Streetboro Street		Amount of Each Disbursement this Period 61.44
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Campaign event expense-paper products		Transaction ID : SB17.10380
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. Aramark @Heinz Field		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 500 Art Rooney Avenue		Amount of Each Disbursement this Period 2965.67
City Pittsburgh	State PA Zip Code 15212	
Purpose of Disbursement Volunteer event-catering		Transaction ID : SB17.10422
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. Armstrong		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 437 N Main St		Amount of Each Disbursement this Period 111.99
City Butler	State PA Zip Code 16001	
Purpose of Disbursement internet service		Transaction ID : SB17.10476
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).....	3139.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bellwether Consulting Group			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 1100 G. Street NW Suite 800			Amount of Each Disbursement this Period 24000.00 Transaction ID : SB17.10248
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement Fundraising Consulting	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. Bellwether Consulting Group			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 1100 G. Street NW Suite 800			Amount of Each Disbursement this Period 2609.80 Transaction ID : SB17.10319
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement see memos	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. Bellwether Consulting Group			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 1100 G. Street NW Suite 800			Amount of Each Disbursement this Period 29.60 Transaction ID : SB17.10319.0 [MEMO ITEM]
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement parking	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).....	26609.80
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 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bellwether Consulting Group			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 1100 G. Street NW Suite 800			Amount of Each Disbursement this Period 80.20
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement postage		Category/ Type	Transaction ID : SB17.10319.1 [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. Bellwether Consulting Group			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 1100 G. Street NW Suite 800			Amount of Each Disbursement this Period 2500.00
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement Fundraising Consulting		Category/ Type	Transaction ID : SB17.10319.2 [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. Bellwether Consulting Group			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2014
Mailing Address 1100 G. Street NW Suite 800			Amount of Each Disbursement this Period 2500.00
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement Fundraising consulting		Category/ Type	Transaction ID : SB17.10408
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).....	2500.00
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 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Berkheimer Tax Administrator		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address PO Box 900		Amount of Each Disbursement this Period 224.11 Transaction ID : SB17.10317
City Bangor	State PA	
Zip Code 18013	Purpose of Disbursement Employment tax	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. Butler Eagle		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address PO box 271		Amount of Each Disbursement this Period 840.00 Transaction ID : SB17.10245
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement advertising	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. By Request		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 8330 Keefer Road		Amount of Each Disbursement this Period 289.74 Transaction ID : SB17.10239
City Girard	State PA	
Zip Code 16417	Purpose of Disbursement Campaign expense-catering	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).....	1353.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 183.52 Transaction ID : SB17.10231
City Washington State DC Zip Code 20003	Purpose of Disbursement meeting expense-food and beverage	
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. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 173.93 Transaction ID : SB17.10232
City Washington State DC Zip Code 20003	Purpose of Disbursement meeting expense-food and beverage	
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. Carbis Walker LLP		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 2599 Wilmington Road		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.10479
City New Castle State PA Zip Code 16105	Purpose of Disbursement Payroll Processing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	607.45
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 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Veronica Cardello			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 123 Boyers Rd			Amount of Each Disbursement this Period 2814.37	
City Forestville	State PA	Zip Code 16035	Transaction ID : SB17.10343	
Purpose of Disbursement Salary		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. Veronica Cardello			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014	
Mailing Address 123 Boyers Rd			Amount of Each Disbursement this Period 610.34	
City Forestville	State PA	Zip Code 16035	Transaction ID : SB17.10443	
Purpose of Disbursement see memos		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. Veronica Cardello			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014	
Mailing Address 123 Boyers Rd			Amount of Each Disbursement this Period 497.74	
City Forestville	State PA	Zip Code 16035	Transaction ID : SB17.10443.0	
Purpose of Disbursement Salary		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).....	3424.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Veronica Cardello		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 123 Boyers Rd		Amount of Each Disbursement this Period 97.78
City Forestville	State PA	
Purpose of Disbursement reimbursed mileage	Zip Code 16035	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. Veronica Cardello		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 123 Boyers Rd		Amount of Each Disbursement this Period 14.82
City Forestville	State PA	
Purpose of Disbursement reimbursed expenses-food and beverage	Zip Code 16035	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. Ann Coleman		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 6758 St. Regis Blvd.		Amount of Each Disbursement this Period 2098.08
City Hudson	State OH	
Purpose of Disbursement see memos	Zip Code 44236	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).....	2098.08
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ann Coleman		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 6758 St. Regis Blvd.		Amount of Each Disbursement this Period 1500.00
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Fundraising Consulting	Candidate Name	Transaction ID : SB17.10373.0
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. Ann Coleman		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 6758 St. Regis Blvd.		Amount of Each Disbursement this Period 590.08
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement reimbursed mileage	Candidate Name	Transaction ID : SB17.10373.1
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. Commonwealth of PA		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2014
Mailing Address North Office Building		Amount of Each Disbursement this Period 272.99
City Harrisburg	State PA Zip Code 17120	
Purpose of Disbursement payroll taxes	Candidate Name	Transaction ID : SB17.10456
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	272.99
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 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Country Fair		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 1939 W. Eighth Street		Amount of Each Disbursement this Period 47.34
City Erie	State PA Zip Code 16505	
Purpose of Disbursement travel-fuel	Candidate Name	Transaction ID : SB17.10266
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Dr. Sous Custom Catering		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 438 Brown Avenue		Amount of Each Disbursement this Period 1618.20
City Butler	State PA Zip Code 16001	
Purpose of Disbursement Campaign event-catering	Candidate Name	Transaction ID : SB17.10377
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Carey Dunn Sirianni		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 77 Stonedale Road		Amount of Each Disbursement this Period 3979.75
City Sewickley	State PA Zip Code 15143	
Purpose of Disbursement Fundraising consulting	Candidate Name	Transaction ID : SB17.10475
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	5645.29
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 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Duquesne Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address PO Box 387		Amount of Each Disbursement this Period 2868.11 Transaction ID : SB17.10249
City Pittsburgh	State PA	
Zip Code 16230	Purpose of Disbursement Fundraising expense-catering	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. Enterprise Rent a Car		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 273 Pittsburgh Road		Amount of Each Disbursement this Period 483.15 Transaction ID : SB17.10431
City Butler	State PA	
Zip Code 16002	Purpose of Disbursement van rental	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. Erie Brewing		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 1213 Veshecco Drive		Amount of Each Disbursement this Period 328.60 Transaction ID : SB17.10330
City Erie	State PA	
Zip Code 16501	Purpose of Disbursement Campaign expenses-beverages	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).....	3679.86
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 45 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Erie County Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 183 West 14th Street		Amount of Each Disbursement this Period 525.00 Transaction ID : SB17.10313
City Erie	State PA Zip Code 16501	
Purpose of Disbursement Office rent at fair market value		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. Facebook		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 258.09 Transaction ID : SB17.10229
City Menlo Park	State CA Zip Code 94205	
Purpose of Disbursement advertising		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. Facebook		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 190.06 Transaction ID : SB17.10365
City Menlo Park	State CA Zip Code 94205	
Purpose of Disbursement advertising		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).....	973.15
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 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fed/Ex Office-Hudson OH		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 65 S Main St		Amount of Each Disbursement this Period 23.76 Transaction ID : SB17.10265
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement shipping	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. Fed/Ex Office-Hudson OH		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 65 S Main St		Amount of Each Disbursement this Period 30.30 Transaction ID : SB17.10306
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement shipping	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. Fed/Ex Office-Hudson OH		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 65 S Main St		Amount of Each Disbursement this Period 43.87 Transaction ID : SB17.10325
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement shipping	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).....	97.93
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 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FH Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 2320 West 8th Street		Amount of Each Disbursement this Period 2233.35
City Erie	State PA Zip Code 16505	
Purpose of Disbursement website and email hosting	Candidate Name	Transaction ID : SB17.10253
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. FH Group		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 2320 West 8th Street		Amount of Each Disbursement this Period 5972.77
City Erie	State PA Zip Code 16505	
Purpose of Disbursement see memos	Candidate Name	Transaction ID : SB17.10486
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. FH Group		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 2320 West 8th Street		Amount of Each Disbursement this Period 26.50
City Erie	State PA Zip Code 16505	
Purpose of Disbursement website hosting	Candidate Name	Transaction ID : SB17.10486.0 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	8206.12
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 48 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FH Group		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 2320 West 8th Street		Amount of Each Disbursement this Period 31.80
City Erie	State PA Zip Code 16505	
Purpose of Disbursement email hosting	Candidate Name	Transaction ID : SB17.10486.1
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. FH Group		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 2320 West 8th Street		Amount of Each Disbursement this Period 1713.75
City Erie	State PA Zip Code 16505	
Purpose of Disbursement fundraising invitations	Candidate Name	Transaction ID : SB17.10486.2
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. FH Group		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 2320 West 8th Street		Amount of Each Disbursement this Period 4200.72
City Erie	State PA Zip Code 16505	
Purpose of Disbursement Facebook Advertising	Candidate Name	Transaction ID : SB17.10486.3
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 49 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fine Line Designs		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 232 Poplar Avenue		Amount of Each Disbursement this Period 2210.00 Transaction ID : SB17.10437
City New Cumberland	State PA	
Zip Code 17070	Purpose of Disbursement administrative 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) B. George J. Howe Candy Company		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 629 W Main Street		Amount of Each Disbursement this Period 199.20 Transaction ID : SB17.10279
City Grove City	State PA	
Zip Code 16127	Purpose of Disbursement Campaign expense-parade candy	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. Get Go		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 2906 W. 26th Street		Amount of Each Disbursement this Period 63.42 Transaction ID : SB17.10364
City Erie	State PA	
Zip Code 16506	Purpose of Disbursement travel-fuel	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).....	2472.62
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 50 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Holiday Inn Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2014
Mailing Address 203 N Duffy Road		Amount of Each Disbursement this Period 281.22
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement travel-lodging	Transaction ID : SB17.10399
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. Holiday Inn Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2014
Mailing Address 203 N Duffy Road		Amount of Each Disbursement this Period 421.83
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement travel-lodging	Transaction ID : SB17.10519
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. Holiday Inn Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2014
Mailing Address 203 N Duffy Road		Amount of Each Disbursement this Period 4.00
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement travel expense	Transaction ID : SB17.10409
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).....	707.05
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 51 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Holiday Inn Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 203 N Duffy Road		Amount of Each Disbursement this Period 152.59 Transaction ID : SB17.10419
City Butler	State PA	
Purpose of Disbursement travel-lodging	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. Holiday Inn Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 203 N Duffy Road		Amount of Each Disbursement this Period 152.59 Transaction ID : SB17.10420
City Butler	State PA	
Purpose of Disbursement travel-lodging	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. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address PO Box 80253		Amount of Each Disbursement this Period 124.95 Transaction ID : SB17.10347
City Cincinnati	State OH	
Purpose of Disbursement employment tax	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).....	430.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2014
Mailing Address PO Box 80253		Amount of Each Disbursement this Period 2275.94 Transaction ID : SB17.10455
City Cincinnati	State OH Zip Code 45280	
Purpose of Disbursement payroll taxes	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Ipromoteu		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 321 Commonwealth Boulevard		Amount of Each Disbursement this Period 565.00 Transaction ID : SB17.10332
City Wayland	State MA Zip Code 01778	
Purpose of Disbursement Campaign expense-sweatshirts	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. GEORGE J JR J. KELLY Jr.		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 239 W PEARL STREET		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.10540
City BUTLER	State PA Zip Code 16001	
Purpose of Disbursement Reimb for incurred Campaign Expenses	Candidate Name	Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: PA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	2960.94
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 53 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GEORGE J JR J. KELLY Jr.		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 239 W PEARL STREET		Amount of Each Disbursement this Period 1992.00 Transaction ID : SB17.10485
City BUTLER	State PA	
Zip Code 16001	Purpose of Disbursement Reimbursement - Fundraising Expense	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PA District: 03	

Full Name (Last, First, Middle Initial) B. Heinz Field		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 100 Art Rooney Avenue		Amount of Each Disbursement this Period 1992.00 Transaction ID : SB17.10485.0 [MEMO ITEM]
City Pittsburgh	State PA	
Zip Code 15212	Purpose of Disbursement Box Tickets for Fundraising Event	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. Victoria Kelly		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 239 W Pearl Street		Amount of Each Disbursement this Period 4099.66 Transaction ID : SB17.10482
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Fundraising expense reimbursement	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).....	6091.66
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.10485

This was the cost of sporting event box -catering and tickets

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Salamander Report & Spa		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 500 North Pendleton Street		Amount of Each Disbursement this Period 4099.66
City Middleburg	State VA Zip Code 20117	
Purpose of Disbursement Fundraising Expense- Catering Reimbursement		Transaction ID : SB17.10482.0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. LN Consulting		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 121 State Street		Amount of Each Disbursement this Period 2500.00
City Harrisburg	State PA Zip Code 17101	
Purpose of Disbursement Campaign Management Fee		Transaction ID : SB17.10327
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)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) c. Meadville Tribune		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 947 Federal Court		Amount of Each Disbursement this Period 999.00
City Meadville	State PA Zip Code 16335	
Purpose of Disbursement Political advertising		Transaction ID : SB17.10296
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)	Category/Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3499.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Miss Vicky's Tasty Treats		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 337 Short Street		Amount of Each Disbursement this Period 169.73 Transaction ID : SB17.10270
City Erie	State PA Zip Code 16507	
Purpose of Disbursement Campaign expense-catering	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Montanna's Rib & Chop		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 11142 Perry Hwy		Amount of Each Disbursement this Period 304.52 Transaction ID : SB17.10274
City Meadville	State PA Zip Code 16335	
Purpose of Disbursement Campaign expense-food and beverage	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Edward Natali		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 749 Bullcreek Road		Amount of Each Disbursement this Period 201.40 Transaction ID : SB17.10350
City Butler	State PA Zip Code 16002	
Purpose of Disbursement reimbursement-food and beverage	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	675.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. New Castle News		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 27 N Mercer St		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.10416
City New Castle	State PA	
Zip Code 16103	Purpose of Disbursement advertising	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. Orlando S. Pride III Estate		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 220 South Main Street		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.10326
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Office rent	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. Bill Page		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 630 Young Road		Amount of Each Disbursement this Period 325.00 Transaction ID : SB17.10268
City Erie	State PA	
Zip Code 16509	Purpose of Disbursement Event Entertainment	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).....	2425.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PA UC Fund		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address PO Box 68568 Labor & Industry Building		Amount of Each Disbursement this Period 761.26
City Harrisburg	State PA Zip Code 17106	
Purpose of Disbursement Employment tax	Category/Type	Transaction ID : SB17.10345
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. Amy Petraglia		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 8623 Lexington Place		Amount of Each Disbursement this Period 3979.75
City Wexford	State PA Zip Code 15090	
Purpose of Disbursement Fundraising consulting	Category/Type	Transaction ID : SB17.10474
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement credit card processing fees	Category/Type	Transaction ID : SB17.10234
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).....	4743.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 1.44
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement credit card processing fees	Transaction ID : SB17.10264
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 34.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement credit card processing fees	Transaction ID : SB17.10292
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 0.58
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement credit card processing fee	Transaction ID : SB17.10309
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).....	36.52
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2470 East State Street		Amount of Each Disbursement this Period 359.58 Transaction ID : SB17.10512
City Hermitage	State PA Zip Code 16148	
Purpose of Disbursement bank fees	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2470 East State Street		Amount of Each Disbursement this Period 28.69 Transaction ID : SB17.10513
City Hermitage	State PA Zip Code 16148	
Purpose of Disbursement Merchant fees	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 2470 East State Street		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.10357
City Hermitage	State PA Zip Code 16148	
Purpose of Disbursement Wire transfer fees	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	538.27
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 61 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Printing Concepts		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 4246 Hudson Drive		Amount of Each Disbursement this Period 3718.56
City Stowe	State OH	
Zip Code 44224	Purpose of Disbursement postage	Transaction ID : SB17.10305
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. Printing Concepts		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 4246 Hudson Drive		Amount of Each Disbursement this Period 3686.16
City Stowe	State OH	
Zip Code 44224	Purpose of Disbursement Printing of GOTV postcards and palm cards	Transaction ID : SB17.10477
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. Rachel's Roadhouse		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 100 Fairfield Lane		Amount of Each Disbursement this Period 43.10
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement meeting expense-food and beverage	Transaction ID : SB17.10227
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).....	7447.82
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 62 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rachel's Roadhouse			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address 100 Fairfield Lane			Amount of Each Disbursement this Period 66.69	
City Butler	State PA	Zip Code 16001	Transaction ID : SB17.10295	
Purpose of Disbursement meeting expense-food and 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:				

Full Name (Last, First, Middle Initial) B. Jeffrey Rein			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 134 Sasse Rd			Amount of Each Disbursement this Period 2959.43	
City Cabot	State PA	Zip Code 16023	Transaction ID : SB17.10339	
Purpose of Disbursement Salary		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. Jeffrey Rein			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014	
Mailing Address 134 Sasse Rd			Amount of Each Disbursement this Period 1743.82	
City Cabot	State PA	Zip Code 16023	Transaction ID : SB17.10444	
Purpose of Disbursement Salary		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).....	4769.94
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 63 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Samantha Sandone			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 6779 St Regis Blvd			Amount of Each Disbursement this Period 133.62	
City Hudson	State OH	Zip Code 44236	Transaction ID : SB17.10341	
Purpose of Disbursement administrative 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) B. Sheetz Butler			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 100 Freeport Road			Amount of Each Disbursement this Period 75.00	
City Butler	State PA	Zip Code 16001	Transaction ID : SB17.10289	
Purpose of Disbursement travel-fuel		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. Simple Toll Free			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014	
Mailing Address PO Box 41069			Amount of Each Disbursement this Period 0.49	
City Long Beach	State CA	Zip Code 90853	Transaction ID : SB17.10237	
Purpose of Disbursement conference call expense		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).....	209.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. Simple Toll Free

Mailing Address PO Box 41069

City Long Beach State CA Zip Code 90853

Purpose of Disbursement conference call expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 21 / 2014

Amount of Each Disbursement this Period: 2.86

Transaction ID : SB17.10267

Full Name (Last, First, Middle Initial)
B. Simple Toll Free

Mailing Address PO Box 41069

City Long Beach State CA Zip Code 90853

Purpose of Disbursement conference call expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 27 / 2014

Amount of Each Disbursement this Period: 4.39

Transaction ID : SB17.10300

Full Name (Last, First, Middle Initial)
c. Simple Toll Free

Mailing Address PO Box 41069

City Long Beach State CA Zip Code 90853

Purpose of Disbursement conference call expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 28 / 2014

Amount of Each Disbursement this Period: 3.56

Transaction ID : SB17.10307

SUBTOTAL of Disbursements This Page (optional) 10.81

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. Simple Toll Free

Mailing Address PO Box 41069

City Long Beach State CA Zip Code 90853

Purpose of Disbursement conference call expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 28 / 2014

Amount of Each Disbursement this Period: 1.47

Transaction ID : SB17.10308

Full Name (Last, First, Middle Initial)
B. Simple Toll Free

Mailing Address PO Box 41069

City Long Beach State CA Zip Code 90853

Purpose of Disbursement conference call expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 04 / 2014

Amount of Each Disbursement this Period: 1.96

Transaction ID : SB17.10391

Full Name (Last, First, Middle Initial)
c. Simple Toll Free

Mailing Address PO Box 41069

City Long Beach State CA Zip Code 90853

Purpose of Disbursement conference call expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 04 / 2014

Amount of Each Disbursement this Period: 2.03

Transaction ID : SB17.10517

SUBTOTAL of Disbursements This Page (optional) 5.46

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Smith Provision Company			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 1300 Cranberry Street			Amount of Each Disbursement this Period 217.65 Transaction ID : SB17.10277
City Erie	State PA	Zip Code 16501	
Purpose of Disbursement Campaign expense-food		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. Strategic Media Placement			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 7669 Stagers Loop			Amount of Each Disbursement this Period 125000.00 Transaction ID : SB17.10225
City Delaware	State OH	Zip Code 43015	
Purpose of Disbursement Media buy		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. Strategic Media Placement			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 7669 Stagers Loop			Amount of Each Disbursement this Period 20000.00 Transaction ID : SB17.10281
City Delaware	State OH	Zip Code 43015	
Purpose of Disbursement Media buy		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).....	145217.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 2747 12th Street		Amount of Each Disbursement this Period 24.01
City Erie	State PA	
Zip Code 16505	Purpose of Disbursement travel-fuel	Transaction ID : SB17.10372
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. Times Publishing Company		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 205 W 12th Street		Amount of Each Disbursement this Period 1637.50
City Erie	State PA	
Zip Code 16534	Purpose of Disbursement advertising	Transaction ID : SB17.10247
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. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 3600 Liberty Street		Amount of Each Disbursement this Period 497.40
City Erie	State PA	
Zip Code 16508	Purpose of Disbursement internet and cable service	Transaction ID : SB17.10298
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).....	2158.91
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 82		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Trib Total Media		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 622 Cabin Hill Drive		Amount of Each Disbursement this Period 627.00 Transaction ID : SB17.10334
City Greensburg State PA Zip Code 15601	Purpose of Disbursement advertising	
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. U Pick 6 Tap House		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 333 State Street		Amount of Each Disbursement this Period 50.35 Transaction ID : SB17.10338
City Erie State PA Zip Code 16505	Purpose of Disbursement meeting expense-food and beverage	
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. US Postmaster-Butler		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 345 S Main St		Amount of Each Disbursement this Period 98.00 Transaction ID : SB17.10233
City Butler State PA Zip Code 16001	Purpose of Disbursement postage	
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).....	775.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Verizon Wireless - Erie			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 5043 Peach Street			Amount of Each Disbursement this Period 269.30	
City Erie	State PA	Zip Code 16506	Transaction ID : SB17.10290	
Purpose of Disbursement cellular phone 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:				

Full Name (Last, First, Middle Initial) B. Wal-Mart Stores-Butler			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 400 Butler Commons			Amount of Each Disbursement this Period 17.76	
City Butler	State PA	Zip Code 16001	Transaction ID : SB17.10381	
Purpose of Disbursement Campaign event 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) c. Wal-Mart Stores-Butler			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 400 Butler Commons			Amount of Each Disbursement this Period 64.49	
City Butler	State PA	Zip Code 16001	Transaction ID : SB17.10384	
Purpose of Disbursement Campaign event 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:				

SUBTOTAL of Disbursements This Page (optional).....	351.59
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wal-Mart Stores-Butler		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 400 Butler Commons		Amount of Each Disbursement this Period 37.00
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Campaign event supplies	Transaction ID : SB17.10385
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. Michael Walter		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2206 Eastern Avenue		Amount of Each Disbursement this Period 2634.89
City Erie	State PA	
Zip Code 16510	Purpose of Disbursement Salary	Transaction ID : SB17.10344
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. Michael Walter		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 2206 Eastern Avenue		Amount of Each Disbursement this Period 60.00
City Erie	State PA	
Zip Code 16510	Purpose of Disbursement Petty Cash - Election Day Activities	Transaction ID : SB17.10542
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).....	2731.89
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 71 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Michael Walter			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014	
Mailing Address 2206 Eastern Avenue			Amount of Each Disbursement this Period 618.47	
City Erie	State PA	Zip Code 16510	Transaction ID : SB17.10438	
Purpose of Disbursement see memos		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. Michael Walter			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014	
Mailing Address 2206 Eastern Avenue			Amount of Each Disbursement this Period 395.82	
City Erie	State PA	Zip Code 16510	Transaction ID : SB17.10438.0	
Purpose of Disbursement salary		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:		[MEMO ITEM]		

Full Name (Last, First, Middle Initial) c. Michael Walter			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014	
Mailing Address 2206 Eastern Avenue			Amount of Each Disbursement this Period 184.24	
City Erie	State PA	Zip Code 16510	Transaction ID : SB17.10438.1	
Purpose of Disbursement reimbursed mileage		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:		[MEMO ITEM]		

SUBTOTAL of Disbursements This Page (optional).....	618.47
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 72 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Michael Walter		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 2206 Eastern Avenue		Amount of Each Disbursement this Period 38.41
City Erie	State PA Zip Code 16510	
Purpose of Disbursement reimbursed expenses-food and beverage		Transaction ID : SB17.10438.2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Western PA Services Academies Ball		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address		Amount of Each Disbursement this Period 500.00
City	State Zip Code	
Purpose of Disbursement Campaign expense-advertising		Transaction ID : SB17.10323
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)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) c. Willie's Brew and Que		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014
Mailing Address 300 Tingey Street		Amount of Each Disbursement this Period 377.60
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Staff Holiday Party		Transaction ID : SB17.10494
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	877.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wine and Spirits Store		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 2656 Ellwood Road		Amount of Each Disbursement this Period 321.06
City New Castle	State PA	
Zip Code 16105	Purpose of Disbursement Volunteer thank you gifts	Transaction ID : SB17.10427
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. Z Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 2550 E State Street		Amount of Each Disbursement this Period 333.88
City Hermitage	State PA	
Zip Code 16148	Purpose of Disbursement cellular phone	Transaction ID : SB17.10501
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Z Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 2550 E State Street		Amount of Each Disbursement this Period 84.78
City Hermitage	State PA	
Zip Code 16148	Purpose of Disbursement cellualr phone services	Transaction ID : SB17.10503
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	739.72
TOTAL This Period (last page this line number only).....	249438.81

**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 74 OF 82	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GEORGE J JR J. KELLY Jr.		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 239 W PEARL STREET		Amount of Each Disbursement this Period 50000.00
City BUTLER	State PA	
Zip Code 16001		
Purpose of Disbursement Loan Repayment 2010		Category/ Type
Candidate Name GEORGE J JR J. KELLY Jr.		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA	District: 03	

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).....	50000.00
TOTAL This Period (last page this line number only).....	50000.00

**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 75 OF 82			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Butler County Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address PO Box 2121		Amount of Each Disbursement this Period 100.00 Transaction ID : SB21.10251
City Butler	State PA	
Zip Code 16003	Purpose of Disbursement Non-federal 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. Clarion County Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 1141 East Main Street		Amount of Each Disbursement this Period 25.00 Transaction ID : SB21.10258
City Clarion	State PA	
Zip Code 16214	Purpose of Disbursement Non-federal 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. Committee to Elect Parke Wentling		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 304 Mercer Road		Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.10243
City Greenville	State PA	
Zip Code 16125	Purpose of Disbursement Non-federal 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:	

SUBTOTAL of Disbursements This Page (optional).....	625.00
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 76 OF 82	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Erie County Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 183 West 14th Street		Amount of Each Disbursement this Period 500.00
City Erie State PA Zip Code 16501	Purpose of Disbursement Non-federal contribution	
Candidate Name	Category/Type	Transaction ID : SB21.10242
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	1125.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.7539**
MIKE KELLY FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) GEORGE J JR J. KELLY Jr.	[PERSONAL FUNDS]	Election: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 239 W PEARL STREET		

City	State	ZIP Code
BUTLER	PA	16001

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
43495.00	2000.00	41495.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 31 / Y 2010 Y	M / D / Y None Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	▶	41495.00
TOTALS This Period (last page in this line only).....	▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.7540

MIKE KELLY FOR CONGRESS

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

[PERSONAL FUNDS]

Election: 2010

GEORGE J JR J. KELLY Jr.

Primary

General

Other (specify) ▼

Mailing Address

239 W PEARL STREET

City

State

ZIP Code

BUTLER

PA

16001

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

M 05 / D 07 / Y 2010 Y Y

Date Due

M M / D D / Y None Y Y

Interest Rate

0.00 % (apr)

Secured:

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

100000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.7542

MIKE KELLY FOR CONGRESS

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

[PERSONAL FUNDS]

Election: 2010

GEORGE J JR J. KELLY Jr.

Primary

General

Other (specify) ▼

Mailing Address

239 W PEARL STREET

City

State

ZIP Code

BUTLER

PA

16001

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

50000.00

50000.00

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 05 /

D 10 /

Y 2010 Y

M /

D /

Y None Y

0.00 % (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

0.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.7543

MIKE KELLY FOR CONGRESS

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

[PERSONAL FUNDS]

Election: 2010

GEORGE J JR J. KELLY Jr.

Primary

General

Other (specify) ▼

Mailing Address

239 W PEARL STREET

City

State

ZIP Code

BUTLER

PA

16001

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

M 05 / D 12 / Y 2010

Date Due

M M / D D / Y 00

Interest Rate

0.00 % (apr)

Secured:

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

25000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : **SC/10.7544**

MIKE KELLY FOR CONGRESS

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

[PERSONAL FUNDS]

Election: 2010

GEORGE J JR J. KELLY Jr.

Primary

General

Other (specify) ▼

Mailing Address

239 W PEARL STREET

City

State

ZIP Code

BUTLER

PA

16001

Original Amount of Loan

75000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

75000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 30 / 2010

Date Due

M M / D D / Y Y Y Y
None

Interest Rate

0.00 % (apr)

Secured:

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

75000.00

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.7545

MIKE KELLY FOR CONGRESS

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

[PERSONAL FUNDS]

Election: 2010

GEORGE J JR J. KELLY Jr.

Primary

General

Other (specify) ▼

Mailing Address

239 W PEARL STREET

City

State

ZIP Code

BUTLER

PA

16001

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

36500.00

0.00

36500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09

30

2010

0.00

0.00

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

36500.00

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

277995.00

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