



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Pat Meehan for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2015 To: M M / D D / Y Y Y Y 03 / 31 / 2015

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	211184.4	2198584.83
(b) Total Contribution Refunds (from Line 20(d)) .....	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	211184.4	2198584.83
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	148494.3	1422780.76
(b) Total Offsets to Operating Expenditures (from Line 14).....	531.49	7647.45
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	147962.81	1415133.31
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	1735553.45	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Pat Meehan for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	21850	30600
(ii) Unitemized.....	1186	836060
(iii) TOTAL of contributions from individuals ▶	23036	866660
(b) Political Party Committees.....	0	1000
(c) Other Political Committees (such as PACs).....	188148.4	1330771.17
(d) The Candidate.....	0	153.66
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	211184.4	2198584.83
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	0
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	531.49	7647.45
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	1129.49	8696.23
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	212845.38	2214928.51

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	148494.3	1422780.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS .....	0	169000
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	148494.3	1591780.76

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1671202.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	212845.38
25. SUBTOTAL (add Line 23 and Line 24).....	1884047.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	148494.3
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1735553.45

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 102
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John D Wanner**

Mailing Address 6610 Northampton Court

City Harrisburg State PA Zip Code 17111-6931

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

Name of Employer Wanner Associates Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 07 / 2015

**Transaction ID : A-CF12477**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Arthur Feldman**

Mailing Address 136 Knightsbridge Road

City Wynnewood State PA Zip Code 19096-1212

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

Name of Employer Tempe School of Medicine Occupation Executive Dean

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2015

**Transaction ID : A-CF12501**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 604 Kentucky Avenue SE Unit A

City Washington State DC Zip Code 20003-3061

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

Name of Employer Thorn Run Partners Occupation Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2015

**Transaction ID : A-CF12514**

Amount of Each Receipt this Period  
**1000**

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

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

**1500.00**

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

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

FOR LINE NUMBER: PAGE 6 OF 102  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

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

Mailing Address 5009 39th Street NW

City Washington State DC Zip Code 20016-4205

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

Name of Employer **DAVIDSON & COMPANY** Occupation **President**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 17 / 2015**

**Transaction ID : A-CF12590**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**John T O'Rourke**

Mailing Address 11028 Stanmore Drive

City Potomac State MD Zip Code 20854-1525

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

Name of Employer **self** Occupation **attorney**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 17 / 2015**

**Transaction ID : A-CF12589**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 446 Sturges Road

City Fairfield State CT Zip Code 06824

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

Name of Employer **ADS Ventures** Occupation **Sr. Vice President**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 19 / 2015**

**Transaction ID : A-CF12612**

Amount of Each Receipt this Period  
**2700**

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

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

**4200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 102
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nathaniel Walton**

Mailing Address 22 Irving Street  
Apt 5

City Boston State MA Zip Code 02114

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

Name of Employer Sachem Strategies Occupation Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : A-CF12611**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**David Tamasi**

Mailing Address 5435 30th Place NW

City Washington State DC Zip Code 20015-1251

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

Name of Employer Rasky Baerlein Occupation Government Relations

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 22 / 2015

**Transaction ID : A-CF12608**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Mark Valente III**

Mailing Address 7055 Leestone Street

City Springfield State VA Zip Code 22151-3520

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

Name of Employer Valente & Associates Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2015

**Transaction ID : A-CF12617**

Amount of Each Receipt this Period  
**1000**

**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 8 OF 102
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Ziff**

Mailing Address 350 Park Avenue  
Floor 11

City State Zip Code  
New York NY 10022-6022

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

Name of Employer Occupation  
Ziff Brothers Investments Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 06 / 2015**

**Transaction ID : A-CF12644**

Amount of Each Receipt this Period  
**2700**

**B.** Full Name (Last, First, Middle Initial)  
**Robert Ziff**

Mailing Address 350 Park Avenue  
Floor 11

City State Zip Code  
New York NY 10022-6022

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

Name of Employer Occupation  
Ziff Brothers Investments Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 06 / 2015**

**Transaction ID : A-CF12645**

Amount of Each Receipt this Period  
**2700**

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

Mailing Address 300 New Jersey Avenue NW  
Suite 601

City State Zip Code  
Washington DC 20001-2080

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

Name of Employer Occupation  
The Hobbs Group President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 18 / 2015**

**Transaction ID : A-CF12677**

Amount of Each Receipt this Period  
**500**

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

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

**5900.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 102
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Gregg R. Melinson Esquire**

Mailing Address **PO Box 179**

City **Gwynedd Valley** State **PA** Zip Code **19437-0179**

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

Name of Employer **Hewlett Packard** Occupation **SVP Gov Relations**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 18 / 2015**

**Transaction ID : A-CF12690**

Amount of Each Receipt this Period  
**2000**

**B.** Full Name (Last, First, Middle Initial)  
**Shawn M. Vasell**

Mailing Address **1331 Pennsylvania Avenue NW  
Suite 1300 N**

City **Washington** State **DC** Zip Code **20004-1741**

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

Name of Employer **Hewlett-Packard Company** Occupation **Director Cong. & Federal Affairs**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 18 / 2015**

**Transaction ID : A-CF12689**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address **1721 N Cliff Street**

City **Alexandria** State **VA** Zip Code **22301-1940**

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

Name of Employer **Venn Strategies** Occupation **Principal**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : A-CF12727**

Amount of Each Receipt this Period  
**500**

**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: (check only one)	PAGE 10 OF 102
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

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

Mailing Address 812 C Street SE

City Washington State DC Zip Code 20003-2120

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

Name of Employer QGA Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12744**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Stephen Francis**

Mailing Address 1001 Pennsylvania Avenue NW Suite 601

City Washington State DC Zip Code 20004-2505

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

Name of Employer Ernst & Young LLP Occupation Tax Services

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12728**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address PO Box 13625

City Philadelphia State PA Zip Code 19101-3625

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

Name of Employer Ally Bank Occupation Chief Public Police Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12721**

Amount of Each Receipt this Period  
**250**

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

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

**2250.00**

**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 102
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

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

Mailing Address 409 G Street SE

City Washington State DC Zip Code 20003-4257

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

Name of Employer The First Group Occupation Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : A-CF12723**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Maria Cino**

Mailing Address 709 G Street NW

City Washington State DC Zip Code 20001-3701

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

Name of Employer Hewlett-Packard Company Occupation Vice President - Corporate Affairs

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF12757**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 5235 Elliott Road

City Bethesda State MD Zip Code 20816-2910

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

Name of Employer Rampy Northrup LLC Occupation lobbyist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF12764**

Amount of Each Receipt this Period  
**500**

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

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

**2000.00**

**21850.00**

**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 102
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ernst & Young Political Action Committee**

Mailing Address 1101 New York Avenue NW

City Washington State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 15 / 2015

**Transaction ID : A-CF12498**

Amount of Each Receipt this Period  
 2000

**B.** Full Name (Last, First, Middle Initial)  
**Northwestern Mutual Life Insurance Company PAC**

Mailing Address 720 E Wisconsin Avenue

City Milwaukee State WI Zip Code 53202-4703

FEC ID number of contributing federal political committee. **C** C00197095

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2015

**Transaction ID : A-CF12500**

Amount of Each Receipt this Period  
 2000

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

Mailing Address 1301 K Street NW Suite 800W

City Washington State DC Zip Code 20005-3317

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2015

**Transaction ID : A-CF12499**

Amount of Each Receipt this Period  
 2000

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

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

6000.00

**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 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. General Electric Company Political Action Committee (GE PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 1299 Pennsylvania Avenue NW  
Suite 900W

City Washington State DC Zip Code 20004-2400

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 23 / 2015

**Transaction ID : A-CF12502**

Amount of Each Receipt this Period  
 1000

**B. Honeywell International PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 101 Constitution Avenue NW  
Suite 500

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2015

**Transaction ID : A-CF12509**

Amount of Each Receipt this Period  
 1000

**C. American Express Company Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 801 Pennsylvania Avenue NW  
Suite 650

City Washington State DC Zip Code 20004-2673

FEC ID number of contributing federal political committee. **C C00040535**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2015

**Transaction ID : A-CF12513**

Amount of Each Receipt this Period  
 1000

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

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

3000.00

**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 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Independent Community Bankers PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1615 L Street NW  
Suite 900  
City Washington State DC Zip Code 20036-5623

FEC ID number of contributing federal political committee. **C C00032698**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 29 / 2015

**Transaction ID : A-CF12512**

Amount of Each Receipt this Period  
3000

**B. Teva Pharmaceuticals USA, Inc. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 25 Massachusetts Avenue NW  
Suite 440  
City Washington State DC Zip Code 20001-7402

FEC ID number of contributing federal political committee. **C C00434811**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 29 / 2015

**Transaction ID : A-CF12511**

Amount of Each Receipt this Period  
1500

**C. U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1100 New York Avenue NW  
Suite 450W  
City Washington State DC Zip Code 20005-3934

FEC ID number of contributing federal political committee. **C C00457754**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 29 / 2015

**Transaction ID : A-CF12510**

Amount of Each Receipt this Period  
2500

**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 15 OF 102
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Boeing Company Political Action Committee**

Full Name (Last, First, Middle Initial)  
Boeing Company Political Action Committee

Mailing Address 1200 Wilson Boulevard

City Arlington State VA Zip Code 22209-2300

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2015

**Transaction ID : A-CF12517**

Amount of Each Receipt this Period  
 2000

**B. General Electric Company Political Action Committee (GE PAC)**

Full Name (Last, First, Middle Initial)  
General Electric Company Political Action Committee (GE PAC)

Mailing Address 1299 Pennsylvania Avenue NW Suite 900W

City Washington State DC Zip Code 20004-2400

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2015

**Transaction ID : A-CF12516**

Amount of Each Receipt this Period  
 1000

**C. Investment Company Institute Political Action Committee**

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 20005-2110

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2015

**Transaction ID : A-CF12518**

Amount of Each Receipt this Period  
 2000

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

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

5000.00

**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 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Nextera Energy, Inc. Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 801 Pennsylvania Avenue NW  
suite 220

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00064774**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2015

**Transaction ID : A-CF12515**

Amount of Each Receipt this Period  
2000

**B. Association for Advanced Life Underwriting PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 11921 Freedom Drive  
Suite 1100

City Reston State VA Zip Code 20190-5634

FEC ID number of contributing federal political committee. **C C00447565**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2015

**Transaction ID : A-CF12520**

Amount of Each Receipt this Period  
2000

**C. Altria Group, Inc. Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 101 Constitution Avenue NW

City Washington State DC Zip Code 20001-2133

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2015

**Transaction ID : A-CF12534**

Amount of Each Receipt this Period  
2000

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

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

6000.00



**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 102
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Bank of America Federal PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1455 Pennsylvania Avenue NW  
Suite 950

City Washington State DC Zip Code 20004-1043

FEC ID number of contributing federal political committee. **C C00364778**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 06 / 2015

**Transaction ID : A-CF12573**

Amount of Each Receipt this Period  
2000

**B. Bikes Belong Coalition Ltd. Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1928 Pearl Street

City Boulder State CO Zip Code 80302-4428

FEC ID number of contributing federal political committee. **C C00372862**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 09 / 2015

**Transaction ID : A-CF12577**

Amount of Each Receipt this Period  
2500

**C. Fund For American Opportunity PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 65796

City Washington State DC Zip Code 20035-5796

FEC ID number of contributing federal political committee. **C C00336297**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 09 / 2015

**Transaction ID : A-CF12580**

Amount of Each Receipt this Period  
1000

**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 18 OF 102
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Johnson & Johnson Political Action Committee**

Mailing Address 1 Johnson And Johnson Plaza

City State Zip Code  
New Brunswick NJ 08933-0001

FEC ID number of contributing federal political committee. **C** C00010983

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 09 / 2015

**Transaction ID : A-CF12579**

Amount of Each Receipt this Period  
2500

**B.** Full Name (Last, First, Middle Initial)  
**National Association Of Insurance And Financial Advisors Political Action Comm**

Mailing Address 2901 Telestar Court

City State Zip Code  
Falls Church VA 22042-1260

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 09 / 2015

**Transaction ID : A-CF12575**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**National Association Of Insurance And Financial Advisors Political Action Comm**

Mailing Address 2901 Telestar Court

City State Zip Code  
Falls Church VA 22042-1260

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 09 / 2015

**Transaction ID : A-CF12787**

Amount of Each Receipt this Period  
500

**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 19 OF 102	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Political Action Committee Of The American Association Of Orthopaedic Surgeons**

Mailing Address 317 Massachusetts Avenue NE

City Washington State DC Zip Code 20002-5769

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 09 / 2015

**Transaction ID : A-CF12574**

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**Wine & Spirits Wholesalers of America PAC**

Mailing Address 805 15th Street NW Suite 430

City Washington State DC Zip Code 20005-2273

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 09 / 2015

**Transaction ID : A-CF12578**

Amount of Each Receipt this Period  
2000

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

Mailing Address 1301 K Street NW Suite 800W

City Washington State DC Zip Code 20005-3317

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 10 / 2015

**Transaction ID : A-CF12601**

Amount of Each Receipt this Period  
1500

**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 20 OF 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Air Line Pilots Association PAC**

Mailing Address 1625 Massachusetts Avenue NW

City Washington State DC Zip Code 20036-2212

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2015

**Transaction ID : A-CF12592**

Amount of Each Receipt this Period  
 3000

**B.** Full Name (Last, First, Middle Initial)  
**Honeywell International PAC**

Mailing Address 101 Constitution Avenue NW Suite 500

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2015

**Transaction ID : A-CF12593**

Amount of Each Receipt this Period  
 1500

**C.** Full Name (Last, First, Middle Initial)  
**National Association Of Enrolled Agents Political Action Committee**

Mailing Address PO Box 65071

City Washington State DC Zip Code 20035-5071

FEC ID number of contributing federal political committee. **C** C00415372

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2015

**Transaction ID : A-CF12588**

Amount of Each Receipt this Period  
 1000

**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: PAGE 21 OF 102  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. New York Life Insurance Company Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 51 Madison Avenue  
 Room 1109  
 City State Zip Code  
 New York NY 10010-1603  
 FEC ID number of contributing federal political committee. **C C00158881**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2015  
**Transaction ID : A-CF12594**  
 Amount of Each Receipt this Period  
 2500

**B. Pioneer Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 701 8th Street NW  
 Suite 500  
 City State Zip Code  
 Washington DC 20001-3965  
 FEC ID number of contributing federal political committee. **C C00325357**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2648.4

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2015  
**Transaction ID : A-IF12591**  
 Amount of Each Receipt this Period  
 2648.4  
 Inkind: in-kind

**C. Transportation Intermediaries Association Tiapac**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1625 Prince Street  
 Suite 200  
 City State Zip Code  
 Alexandria VA 22314-2883  
 FEC ID number of contributing federal political committee. **C C00335091**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2015  
**Transaction ID : A-CF12587**  
 Amount of Each Receipt this Period  
 1500

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

6648.40

**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 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Deloitte Federal Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 365

City Washington State DC Zip Code 20044-0365

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2015

**Transaction ID : A-CF12607**

Amount of Each Receipt this Period  
 5000

**B. Fedexpac Federal Express Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 942 S Shady Grove Road

City Memphis State TN Zip Code 38120-4117

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2015

**Transaction ID : A-CF12616**

Amount of Each Receipt this Period  
 2000

**C. Cigna Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1601 Chestnut Street

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing federal political committee. **C** C00085316

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2015

**Transaction ID : A-CF12613**

Amount of Each Receipt this Period  
 1000

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 102
	<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)  
**Pat Meehan for Congress**

**A. Citigroup Inc. Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1101 Pennsylvania Avenue NW  
Suite 1000

City Washington State DC Zip Code 20004-2524

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 24 / 2015

**Transaction ID : A-CF12614**

Amount of Each Receipt this Period  
1500

**B. Wells Fargo and Co. Employee PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address Sixth And Marquette Mac N9305  
084

City Minneapolis State MN Zip Code 55479-0001

FEC ID number of contributing federal political committee. **C C00034595**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 24 / 2015

**Transaction ID : A-CF12615**

Amount of Each Receipt this Period  
2000

**C. National Assoc. Of Independent Life Brokerage Agen**

Full Name (Last, First, Middle Initial)  
Mailing Address 228 S Washington Street  
Suite 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C C00422204**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 02 / 2015

**Transaction ID : A-CF12697**

Amount of Each Receipt this Period  
2500

Contribution 2016 P

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 102
	<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)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
American Academy Of Dermatology Association Political Action Committee (skinpac)

Mailing Address 1445 New York Avenue NW  
Suite 800

City Washington State DC Zip Code 20005-2125

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : A-CF12643**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
American College of Radiology Association PAC

Mailing Address 1891 Preston White Drive

City Reston State VA Zip Code 20191-4326

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : A-CF12649**

Amount of Each Receipt this Period  
 2000

**C.** Full Name (Last, First, Middle Initial)  
CSL Behring Employees PAC

Mailing Address 1020 1st Avenue

City King Of Prussia State PA Zip Code 19406-1310

FEC ID number of contributing federal political committee. **C** C00422501

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : A-CF12648**

Amount of Each Receipt this Period  
 1000

**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 25 OF 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Dow Chemical Company Employees PAC**

Full Name (Last, First, Middle Initial)  
Dow Chemical Company Employees PAC

Mailing Address 1776 I Street NW  
Suite 1050

City Washington State DC Zip Code 20006-3720

FEC ID number of contributing federal political committee. **C** C00074096

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : A-CF12647**

Amount of Each Receipt this Period  
 1000

**B. Fresenius Medical Care North America Pac**

Full Name (Last, First, Middle Initial)  
Fresenius Medical Care North America Pac

Mailing Address 801 Pennsylvania Avenue NW  
Suite 255

City Washington State DC Zip Code 20004-3637

FEC ID number of contributing federal political committee. **C** C00401299

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : A-CF12651**

Amount of Each Receipt this Period  
 1000

**C. General Cigar Company, Inc. Political Action Committee (general Cigar Pac)**

Full Name (Last, First, Middle Initial)  
General Cigar Company, Inc. Political Action Committee (general Cigar Pac)

Mailing Address 10900 Nuckols Road  
Suite 100

City Glen Allen State VA Zip Code 23060-9277

FEC ID number of contributing federal political committee. **C** C00488320

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : A-CF12641**

Amount of Each Receipt this Period  
 500

**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 26 OF 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Healthways Inc. Federal Pac**

Mailing Address 701 Cool Springs Boulevard

City Franklin State TN Zip Code 37067-2697

FEC ID number of contributing federal political committee. **C C00411918**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 06 / 2015**

**Transaction ID : A-CF12650**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Home Depot Inc. Political Action Committee**

Mailing Address 1155 F Street NW Suite 400

City Washington State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 06 / 2015**

**Transaction ID : A-CF12646**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**Political Action Committee Of The American Association Of Orthopaedic Surgeons**

Mailing Address 317 Massachusetts Avenue NE

City Washington State DC Zip Code 20002-5769

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 06 / 2015**

**Transaction ID : A-CF12652**

Amount of Each Receipt this Period  
**1000**

**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 27 OF 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Republican Main Street PAC**

Full Name (Last, First, Middle Initial)  
Republican Main Street PAC

Mailing Address 325 7th Street NW  
Suite 610

City Washington State DC Zip Code 20004-2822

FEC ID number of contributing federal political committee. **C** C30000038

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : A-CF12640**

Amount of Each Receipt this Period  
 1000

**B. Rite Aid Political Action Committee**

Full Name (Last, First, Middle Initial)  
Rite Aid Political Action Committee

Mailing Address 30 Hunter Lane

City Camp Hill State PA Zip Code 17011-2400

FEC ID number of contributing federal political committee. **C** C00104083

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : A-CF12639**

Amount of Each Receipt this Period  
 1000

**C. Swedish Match PAC**

Full Name (Last, First, Middle Initial)  
Swedish Match PAC

Mailing Address 1021 E Cary Street  
Suite 1600

City Richmond State VA Zip Code 23219-4000

FEC ID number of contributing federal political committee. **C** C00215053

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : A-CF12642**

Amount of Each Receipt this Period  
 1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 102	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Boeing Company Political Action Committee**

Mailing Address 1200 Wilson Boulevard

City State Zip Code  
Arlington VA 22209-2300

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2015

**Transaction ID : A-CF12656**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**American Academy Of Neurology Brainpac**

Mailing Address 509B 2nd Street NE  
Lower LEVEL

City State Zip Code  
Washington DC 20002-4916

FEC ID number of contributing federal political committee. **C** C00435933

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : A-CF12684**

Amount of Each Receipt this Period  
1500

**C.** Full Name (Last, First, Middle Initial)  
**American Association of Nurse Anesthetists Separate Segregated Fund**

Mailing Address 25 Massachusetts Avenue NW  
Suite 550

City State Zip Code  
Washington DC 20001-1408

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : A-CF12679**

Amount of Each Receipt this Period  
1000

**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: (check only one)		PAGE 29 OF 102	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Physical Therapy Association PAC**

Mailing Address 1111 N Fairfax Street

City State Zip Code  
Alexandria VA 22314-1484

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : A-CF12683**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**AT&T Inc. Federal Political Action Committee**

Mailing Address 208 S Akard Street  
Front 2701

City State Zip Code  
Dallas TX 75202-4295

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : A-CF12682**

Amount of Each Receipt this Period  
5000

**C.** Full Name (Last, First, Middle Initial)  
**Cme Group Inc. PAC**

Mailing Address 20 S Wacker Drive

City State Zip Code  
Chicago IL 60606-7431

FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : A-CF12676**

Amount of Each Receipt this Period  
1500

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DaVita HealthCare Partners Inc. PAC**

Mailing Address 500 N Capitol Street NW  
Suite 300

City Washington State DC Zip Code 20001-7407

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : A-CF12680**

Amount of Each Receipt this Period  
 1500

**B.** Full Name (Last, First, Middle Initial)  
**Endo Pharmaceuticals Inc Political Action Committee**

Mailing Address 1400 Atwater Drive

City Malvern State PA Zip Code 19355-8701

FEC ID number of contributing federal political committee. **C** C00452052

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : A-CF12673**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Fmr Llc Political Action Committee (fidelity Pac)**

Mailing Address 82 Devonshire Street  
# N5A

City Boston State MA Zip Code 02109-3605

FEC ID number of contributing federal political committee. **C** C00215046

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : A-CF12678**

Amount of Each Receipt this Period  
 1500

**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 31 OF 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**Fox PAC**

Mailing Address 400 N Capitol Street NW  
Suite 890

City Washington State DC Zip Code 20001-1555

FEC ID number of contributing federal political committee. **C** C00330019

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : A-CF12685**

Amount of Each Receipt this Period  
 1000

**B. Full Name (Last, First, Middle Initial)**  
**PricewaterhouseCoopers Political Action Committee**

Mailing Address 1301 K Street NW  
Suite 800W

City Washington State DC Zip Code 20005-3317

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : A-CF12687**

Amount of Each Receipt this Period  
 1500

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

Mailing Address 430 N Michigan Avenue

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C70002563

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : A-CF12674**

Amount of Each Receipt this Period  
 1000

**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: (check only one)	PAGE 32 OF 102
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Tyco International Management Company PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 9 Roszel Road

City State Zip Code  
Princeton NJ 08540-6205

FEC ID number of contributing federal political committee. **C C00113753**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : A-CF12686**

Amount of Each Receipt this Period  
2500

**B. UBS Americas Inc. Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 400 Atlantic Street  
C O Per Dyrvik

City State Zip Code  
Stamford CT 06901-3512

FEC ID number of contributing federal political committee. **C C00012245**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : A-CF12681**

Amount of Each Receipt this Period  
5000

**C. Unisys Corporation Employees PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 11720 Plaza America Drive  
Tower 3

City State Zip Code  
Reston VA 20190-4757

FEC ID number of contributing federal political committee. **C C00345603**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : A-CF12675**

Amount of Each Receipt this Period  
1500

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

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

9000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 102
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

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

Mailing Address 900 1st Avenue

City State Zip Code  
King Of Prussia PA 19406-1308

FEC ID number of contributing federal political committee. **C** C00182980

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2015

**Transaction ID : A-CF12733**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Boeing Company Political Action Committee**

Mailing Address 1200 Wilson Boulevard

City State Zip Code  
Arlington VA 22209-2300

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2015

**Transaction ID : A-CF12707**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**College of American Pathologists Political Action Committee**

Mailing Address 1350 I Street NW  
Suite 590

City State Zip Code  
Washington DC 20005-3305

FEC ID number of contributing federal political committee. **C** C00274944

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2015

**Transaction ID : A-CF12737**

Amount of Each Receipt this Period  
1000

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

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

3000.00

**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 34 OF 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Endo Pharmaceuticals Inc Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1400 Atwater Drive

City Malvern State PA Zip Code 19355-8701

FEC ID number of contributing federal political committee. **C C00452052**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : A-CF12743**

Amount of Each Receipt this Period  
**2000**

**B. Excelsior PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 Ferdinand Day Drive

City Alexandria State VA Zip Code 22304-8701

FEC ID number of contributing federal political committee. **C C00541078**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : A-CF12713**

Amount of Each Receipt this Period  
**1000**

**C. Excelsior PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 Ferdinand Day Drive

City Alexandria State VA Zip Code 22304-8701

FEC ID number of contributing federal political committee. **C C00541078**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : A-CF12714**

Amount of Each Receipt this Period  
**1000**

**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 35 OF 102
	<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)  
**Pat Meehan for Congress**

**A. Express Scripts Inc. Political Fund**

Mailing Address 1 Express Way

City Saint Louis State MO Zip Code 63121-1824

FEC ID number of contributing federal political committee. **C** C00365072

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12729**

Amount of Each Receipt this Period  
 2500

**B. GHC Ancillary Corporation Political Action Committee**

Mailing Address 101 E State Street

City Kennett Square State PA Zip Code 19348-3109

FEC ID number of contributing federal political committee. **C** C00292094

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12726**

Amount of Each Receipt this Period  
 1000

**C. Google Inc. Netpac**

Mailing Address 1101 New York Avenue NW  
Floor 2

City Washington State DC Zip Code 20005-4344

FEC ID number of contributing federal political committee. **C** C00428623

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12708**

Amount of Each Receipt this Period  
 1000

**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 36 OF 102
	<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)  
**Pat Meehan 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 20005-2110

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12706**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Leidos Inc. Political Action Committee**

Mailing Address 301 Laboratory Road

City Oak Ridge State TN Zip Code 37830-6912

FEC ID number of contributing federal political committee. **C** C00546234

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12712**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Corporation Employees' Political Action Committee**

Mailing Address 2121 Crystal Drive  
Suite 100

City Arlington State VA Zip Code 22202-3706

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12709**

Amount of Each Receipt this Period  
 1000

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

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

3000.00

**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 37 OF 102
	<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)  
**Pat Meehan for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**Merck & Co. Inc., Employees Political Action Committee (Merck PAC)**

Mailing Address 601 Pennsylvania Avenue NW  
Bldg. STE

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00097485**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12740**

Amount of Each Receipt this Period  
1000

**B. Full Name (Last, First, Middle Initial)**  
**National Assoc. Of Independent Life Brokerage Agen**

Mailing Address 228 S Washington Street  
Suite 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C C00422204**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12738**

Amount of Each Receipt this Period  
2500

**C. Full Name (Last, First, Middle Initial)**  
**National Multi Housing Council Political Action Committee**

Mailing Address 1850 M Street NW  
Suite 540

City Washington State DC Zip Code 20036-5816

FEC ID number of contributing federal political committee. **C C00130773**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12715**

Amount of Each Receipt this Period  
2000

**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 38 OF 102
	<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)  
**Pat Meehan for Congress**

**A. National Propane Gas Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1899 L Street NW  
Suite 350

City Washington State DC Zip Code 20036-3870

FEC ID number of contributing federal political committee. **C** C00079681

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12711**

Amount of Each Receipt this Period  
 1000

**B. Nationwide Mutual Insurance Company Financial & Investments Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Nationwide Plaza  
# 1-32-301

City Columbus State OH Zip Code 43215-2226

FEC ID number of contributing federal political committee. **C** C00406215

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12741**

Amount of Each Receipt this Period  
 2000

**C. Nationwide Mutual Insurance Company Financial & Investments Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Nationwide Plaza  
# 1-32-301

City Columbus State OH Zip Code 43215-2226

FEC ID number of contributing federal political committee. **C** C00406215

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12742**

Amount of Each Receipt this Period  
 1000

**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 39 OF 102
<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)  
**Pat Meehan for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**Raytheon Company Political Action Committee**

Mailing Address 1100 Wilson Boulevard  
Suite 1500

City Arlington State VA Zip Code 22209-3900

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2015

**Transaction ID : A-CF12710**

Amount of Each Receipt this Period  
1000

**B. Full Name (Last, First, Middle Initial)**  
**Republican Main Street PAC**

Mailing Address 325 7th Street NW  
Suite 610

City Washington State DC Zip Code 20004-2822

FEC ID number of contributing federal political committee. **C** C30000038

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2015

**Transaction ID : A-CF12716**

Amount of Each Receipt this Period  
1000

**C. Full Name (Last, First, Middle Initial)**  
**T-Mobile Usa, Inc. Political Action Committee (t-Pac)**

Mailing Address 601 Pennsylvania Avenue NW  
Suite 800 N

City Washington State DC Zip Code 20004-2710

FEC ID number of contributing federal political committee. **C** C00361758

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2015

**Transaction ID : A-CF12718**

Amount of Each Receipt this Period  
1500

**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: (check only one)	PAGE 40 OF 102
	<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)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tuesday Group PAC**

Mailing Address **PO Box 11586**

City **Washington** State **DC** Zip Code **20008-0786**

FEC ID number of contributing federal political committee. **C C00433060**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : A-CF12719**

Amount of Each Receipt this Period  
**2500**

**B.** Full Name (Last, First, Middle Initial)  
**United Transportation Union Political Action Committee (UTU PAC)**

Mailing Address **24950 Country Club Boulevard Suite 340**

City **North Olmsted** State **OH** Zip Code **44070-5333**

FEC ID number of contributing federal political committee. **C C00001636**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : A-CF12739**

Amount of Each Receipt this Period  
**1500**

**C.** Full Name (Last, First, Middle Initial)  
**Verizon Communications Inc./Verizon Wireless Good Government Club**

Mailing Address **1300 I Street NW Suite 400 W**

City **Washington** State **DC** Zip Code **20005-3314**

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : A-CF12717**

Amount of Each Receipt this Period  
**2000**

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

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

**6000.00**



**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 41 OF 102
	<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)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Verizon Communications Inc./Verizon Wireless Good Government Club**

Mailing Address 1300 I Street NW  
Suite 400 W

City Washington State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12731**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Verizon Communications Inc./Verizon Wireless Good Government Club**

Mailing Address 1300 I Street NW  
Suite 400 W

City Washington State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2015

**Transaction ID : A-CF12732**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Ace Group Holdings, Inc. Political Action Committee**

Mailing Address 436 Walnut Street  
# WAO4P

City Philadelphia State PA Zip Code 19106-3703

FEC ID number of contributing federal political committee. **C** C00348938

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A-CF12754**

Amount of Each Receipt this Period  
 1500

**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: (check only one)	PAGE 42 OF 102
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ace Group Holdings, Inc. Political Action Committee**

Mailing Address 436 Walnut Street  
# WAO4P

City Philadelphia State PA Zip Code 19106-3703

FEC ID number of contributing federal political committee. **C** C00348938

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A-CF12755**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Alticor Political Action Committee**

Mailing Address 7575 E Fulton Road

City Ada State MI Zip Code 49355-0001

FEC ID number of contributing federal political committee. **C** C00034884

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A-CF12756**

Amount of Each Receipt this Period  
2000

**C.** Full Name (Last, First, Middle Initial)  
**Altria Group, Inc. Political Action Committee**

Mailing Address 101 Constitution Avenue NW

City Washington State DC Zip Code 20001-2133

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A-CF12748**

Amount of Each Receipt this Period  
1000

**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 43 OF 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

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

Mailing Address 1120 Connecticut Avenue NW

City Washington State DC Zip Code 20036-3902

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF12763**

Amount of Each Receipt this Period  
**2000**

**B.** Full Name (Last, First, Middle Initial)  
**American Medical Association PAC**

Mailing Address 25 Massachusetts Avenue NW  
Suite 600

City Washington State DC Zip Code 20001-7400

FEC ID number of contributing federal political committee. **C C30001309**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF12765**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Chicago Board Options Exchange Pac**

Mailing Address 400 S La Salle Street

City Chicago State IL Zip Code 60605-1023

FEC ID number of contributing federal political committee. **C C00100693**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF12766**

Amount of Each Receipt this Period  
**2000**

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

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

**5000.00**

**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 44 OF 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Dow Chemical Company Employees PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1776 I Street NW  
Suite 1050  
City Washington State DC Zip Code 20006-3720

FEC ID number of contributing federal political committee. **C** C00074096

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A-CF12768**

Amount of Each Receipt this Period  
4000

**B. Hewlett Packard Company PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 3000 Hanover Street  
Stop 1035  
City Palo Alto State CA Zip Code 94304-1112

FEC ID number of contributing federal political committee. **C** C00196725

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A-CF12767**

Amount of Each Receipt this Period  
5000

**C. International Union of Operation Engineers - Engineers Political Education Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1125 17th Street NW  
City Washington State DC Zip Code 20036-4709

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A-CF12758**

Amount of Each Receipt this Period  
5000

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

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

14000.00

**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 45 OF 102
	<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)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JPMorgan Chase & Co. Pac**

Mailing Address 10 S Dearborn Street  
# 1-0520

City Chicago State IL Zip Code 60603-2300

FEC ID number of contributing federal political committee. **C** C00128512

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A-CF12749**

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**Laborers' International Union Of North America (liuna) Pac**

Mailing Address 905 16th Street NW  
Floor 2

City Washington State DC Zip Code 20006-1703

FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A-CF12759**

Amount of Each Receipt this Period  
2500

**C.** Full Name (Last, First, Middle Initial)  
**Marathon Petroleum Corporation Employees Political Action Committee (mpac)**

Mailing Address PO Box 75000

City Detroit State MI Zip Code 48275-0001

FEC ID number of contributing federal political committee. **C** C00496307

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A-CF12750**

Amount of Each Receipt this Period  
5000

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

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

9500.00

**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 46 OF 102
	<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)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Massachusetts Mutual Life Insurance Company Political Action Committee**

Mailing Address 1295 State Street

City Springfield State MA Zip Code 01111-0001

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 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A-CF12753**

Amount of Each Receipt this Period  
 2000

**B.** Full Name (Last, First, Middle Initial)  
**Medical Device Manufacturers Association Pac**

Mailing Address PO Box 34591

City Washington State DC Zip Code 20043-4591

FEC ID number of contributing federal political committee. **C** C00484162

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A-CF12760**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Nationwide Mutual Insurance Company Financial & Investments Political Action Committee**

Mailing Address 1 Nationwide Plaza # 1-32-301

City Columbus State OH Zip Code 43215-2226

FEC ID number of contributing federal political committee. **C** C00406215

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A-CF12751**

Amount of Each Receipt this Period  
 1000

**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 47 OF 102
<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)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pacific Life Insurance Company Political Action Committee**

Mailing Address 700 Newport Center Drive

City State Zip Code  
Newport Beach CA 92660-6307

FEC ID number of contributing federal political committee. **C C00068528**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A-CF12752**

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**Verizon Communications Inc./Verizon Wireless Good Government Club**

Mailing Address 1300 I Street NW  
Suite 400 W

City State Zip Code  
Washington DC 20005-3314

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A-CF12761**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Weston Solutions Inc. PAC**

Mailing Address 1101 14th Street NW  
Suite 770

City State Zip Code  
Washington DC 20005-5601

FEC ID number of contributing federal political committee. **C C00251843**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A-CF12762**

Amount of Each Receipt this Period  
2500

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

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

5500.00

188148.40

**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 48 OF 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Synergist Consulting LLC**

Mailing Address 600 Pennsylvania Avenue SE  
Suite 330

City Washington State DC Zip Code 20003-6300

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **315**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2015

**Transaction ID : A-OF12630**

Amount of Each Receipt this Period  
 Refund **315**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**315.00**

**315.00**



**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 49 OF 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Eagle National Bank**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8045 W Chester Pike  
 City Upper Darby State PA Zip Code 19082-1300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 244.01

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2015  
**Transaction ID : A-MF12606**  
 Amount of Each Receipt this Period  
 80.44  
 Interest Income

**B. Tru Mark Financial**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1000 Northbrook Drive  
 City Trevoese State PA Zip Code 19053-8430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 326.55

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2015  
**Transaction ID : A-MF12603**  
 Amount of Each Receipt this Period  
 83.65  
 Interest Income

**C. United Savings Bank**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35 E Baltimore Avenue  
 City Media State PA Zip Code 19063-2927  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 529.09

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2015  
**Transaction ID : A-MF12604**  
 Amount of Each Receipt this Period  
 145.08  
 Interest Income

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

309.17

**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 50 OF 102
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Victory Bank**  
Full Name (Last, First, Middle Initial)  
Mailing Address 548 N Lewis Road

City Limerick	State PA	Zip Code 19468-1119
------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**319.37**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2015

**Transaction ID : A-MF12602**

Amount of Each Receipt this Period  
**81.81**

Interest Income

**B. Eagle National Bank**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8045 W Chester Pike

City Upper Darby	State PA	Zip Code 19082-1300
---------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**244.01**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02		28		2015

**Transaction ID : A-MF12696**

Amount of Each Receipt this Period  
**75.11**

Interest Income

**C. Tru Mark Financial**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1000 Northbrook Drive

City Trevose	State PA	Zip Code 19053-8430
-----------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**326.55**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02		28		2015

**Transaction ID : A-MF12693**

Amount of Each Receipt this Period  
**75.58**

Interest Income

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

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

**232.50**

**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 51 OF 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**United Savings Bank**

Mailing Address 35 E Baltimore Avenue

City State Zip Code  
Media PA 19063-2927

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
529.09

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 28 / 2015

**Transaction ID : A-MF12692**

Amount of Each Receipt this Period  
112.78

Interest Income

**B.** Full Name (Last, First, Middle Initial)  
**Victory Bank**

Mailing Address 548 N Lewis Road

City State Zip Code  
Limerick PA 19468-1119

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
319.37

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 28 / 2015

**Transaction ID : A-MF12694**

Amount of Each Receipt this Period  
73.92

Interest Income

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

Mailing Address 1000 Northbrook Drive

City State Zip Code  
Trevose PA 19053-8430

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
326.55

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A-MF12783**

Amount of Each Receipt this Period  
83.7

Interest Income

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

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

270.40

**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 52 OF 102
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**United Savings Bank**

Mailing Address 35 E Baltimore Avenue

City State Zip Code  
Media PA 19063-2927

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
529.09

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A-MF12786**

Amount of Each Receipt this Period  
101.89

Interest Income

**B.** Full Name (Last, First, Middle Initial)  
**Victory Bank**

Mailing Address 548 N Lewis Road

City State Zip Code  
Limerick PA 19468-1119

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
319.37

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

**Transaction ID : A-MF12784**

Amount of Each Receipt this Period  
81.86

Interest Income

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

183.75

995.82

**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 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Delcorep, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address Front Street		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-12527</b>
City Media	State PA Zip Code 19063	
Purpose of Disbursement Administrative/Salary/Overhead: Rent		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Merves Amon &amp; Barsz LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address 50 S Providence Road		Amount of Each Disbursement this Period 3500 <b>Transaction ID : B-E-12528</b>
City Media	State PA Zip Code 19063-3531	
Purpose of Disbursement Compliance Services		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address 1100 Adams Avenue		Amount of Each Disbursement this Period 148.39 <b>Transaction ID : B-E-12537</b>
City Norristown	State PA Zip Code 19403-2404	
Purpose of Disbursement Payroll Service Fee		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4148.39
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address 1100 Adams Avenue		Amount of Each Disbursement this Period 1663.95 <b>Transaction ID : B-E-12538</b>
City Norristown State PA Zip Code 19403-2404	Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. The Theodore Company</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address PO Box 320412		Amount of Each Disbursement this Period 2000 <b>Transaction ID : B-E-12529</b>
City Alexandria State VA Zip Code 22320-4412	Purpose of Disbursement Fundraising Retainer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Ms. Meredith V Buettner</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address 70 Fahnestock Road		Amount of Each Disbursement this Period 1740.45 <b>Transaction ID : B-E-12539</b>
City Malvern State PA Zip Code 19355-2133	Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5404.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 102			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ivana Wolfe</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address 1215 N 13th Street		Amount of Each Disbursement this Period 1161.47 <b>Transaction ID : B-E-12540</b>
City Reading	State PA Zip Code 19604-2018	
Purpose of Disbursement Administrative/Salary/Overhead: Salary		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Area 16 Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 1810 Brooks Road		Amount of Each Disbursement this Period 1250 <b>Transaction ID : B-E-12553</b>
City West Chester	State PA Zip Code 19382-6908	
Purpose of Disbursement Contribution		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Comcast Cable</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address PO Box 3005		Amount of Each Disbursement this Period 200.05 <b>Transaction ID : B-E-12550</b>
City Southeastern	State PA Zip Code 19398-3005	
Purpose of Disbursement Cable Service		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2611.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Engage LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 814 King Street Suite 400		Amount of Each Disbursement this Period 299 <b>Transaction ID : B-E-12552</b>
City Alexandria State VA Zip Code 22314-3069	Purpose of Disbursement Administrative/Salary/Overhead: Website Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Republican Committee of Lancaster County</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 902 Columbia Avenue		Amount of Each Disbursement this Period 5000 <b>Transaction ID : B-E-12554</b>
City Lancaster State PA Zip Code 17603-3129	Purpose of Disbursement Contribution Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Ricoh USA</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 6700 Sugarloaf Parkway		Amount of Each Disbursement this Period 72.85 <b>Transaction ID : B-E-12549</b>
City Duluth State GA Zip Code 30097-4925	Purpose of Disbursement Copying Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5371.85
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 254.72
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Telephone Expense	Transaction ID : B-E-12551
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Visa Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 1334.12
City Saint Louis	State MO	
Zip Code 63179-0408	Purpose of Disbursement Credit Card	Transaction ID : B-E-12530
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Litemovers.com</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 687 Lancaster Avenue		Amount of Each Disbursement this Period 913
City Wayne	State PA	
Zip Code 19087	Purpose of Disbursement Moving Expense	Transaction ID : B-S-1432
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1588.84
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 102			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Iron Hill Brewery</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 30 E State Street		Amount of Each Disbursement this Period 99.33
City Media	State PA	
Zip Code 19063-2904		Transaction ID : B-S-1430
Purpose of Disbursement Meeting Expense	Category/ Type	
Candidate Name		[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 751 W Sproul Road		Amount of Each Disbursement this Period 131.97
City Springfield	State PA	
Zip Code 19064-1215		Transaction ID : B-S-1428
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name		[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. BJ's Wholesale</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 1260 E Woodland Avenue		Amount of Each Disbursement this Period 16.95
City Springfield	State PA	
Zip Code 19064-3969		Transaction ID : B-S-1429
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name		[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Stephen's Prime</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 105 W State Street		Amount of Each Disbursement this Period 122.18
City Media	State PA	
Zip Code 19063-3227	Purpose of Disbursement Meeting Expense	Transaction ID : B-S-1431
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Visa Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 50.69
City Saint Louis	State MO	
Zip Code 63179-0408	Purpose of Disbursement Interest Expense	Transaction ID : B-S-1433
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Visa Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 1449.13
City Saint Louis	State MO	
Zip Code 63179-0408	Purpose of Disbursement Credit Card	Transaction ID : B-E-12531
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1449.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 355.2
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Meeting Expense	Transaction ID : B-S-1434
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. A2LPi</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 212 7th Street SE		Amount of Each Disbursement this Period 856.1
City Washington	State DC	
Zip Code 20003-4311	Purpose of Disbursement Meeting Expense	Transaction ID : B-S-1437
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Visa Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 3659.57
City Saint Louis	State MO	
Zip Code 63179-0408	Purpose of Disbursement Credit Card	Transaction ID : B-E-12532
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3659.57
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. MailChimp</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 530 Means Street NW		Amount of Each Disbursement this Period 300
City Atlanta	State GA	
Zip Code 30318-5793	Purpose of Disbursement Email Subscription	Transaction ID : B-S-1440
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 2955 Market Street		Amount of Each Disbursement this Period 958
City Philadelphia	State PA	
Zip Code 19104-2828	Purpose of Disbursement Travel Expense	Transaction ID : B-S-1441
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Bottega Del Vino</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 7 E 59th Street		Amount of Each Disbursement this Period 1697.25
City New York	State NY	
Zip Code 10022-1013	Purpose of Disbursement Meeting Expense	Transaction ID : B-S-1442
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Smith &amp; Wollensky</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 797 Third Ave at 49th Street		Amount of Each Disbursement this Period 180.45
City New York	State NY	
Zip Code 10022	Purpose of Disbursement Meeting Expense	Transaction ID : B-S-1444
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Anthony's Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 4990 State Road		Amount of Each Disbursement this Period 493.87
City Drexel Hill	State PA	
Zip Code 19026-4675	Purpose of Disbursement Meeting Expense	Transaction ID : B-S-1445
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Visa Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 5426.91
City Saint Louis	State MO	
Zip Code 63179-0408	Purpose of Disbursement Credit Card	Transaction ID : B-E-12533
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5426.91
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 102			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. On Star</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address PO Box 1027		Amount of Each Disbursement this Period \$ 59.8
City Warren	State MI	
Zip Code 48090-1027	Purpose of Disbursement Travel Expense	Transaction ID : B-S-1446
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paypal</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 2211 N 1st Street		Amount of Each Disbursement this Period \$ 891
City San Jose	State CA	
Zip Code 95131-2021	Purpose of Disbursement Travel Expense	Transaction ID : B-S-1447
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period \$ 50
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Meeting Expense	Transaction ID : B-S-1451
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	\$ 0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 102			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Flemings</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 555 E Lancaster Avenue		Amount of Each Disbursement this Period 545.12
City Wayne	State PA	
Zip Code 19087-5158	Purpose of Disbursement Meeting Expense	Transaction ID : B-S-1452
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PTC EZ Pass Auto</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 7631 Derry Street		Amount of Each Disbursement this Period 150
City Harrisburg	State PA	
Zip Code 17111-5232	Purpose of Disbursement Travel Expense	Transaction ID : B-S-1453
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Bobby Vans</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 809 15th Street NW		Amount of Each Disbursement this Period 361.76
City Washington	State DC	
Zip Code 20005-2203	Purpose of Disbursement Meeting Expense	Transaction ID : B-S-1455
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Courtyard By Marriott**

Full Name (Last, First, Middle Initial)  
Mailing Address 900 F Street NW

City Washington State DC Zip Code 20004-1404

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
01 / 08 / 2015

Amount of Each Disbursement this Period  
1455.84

Transaction ID : B-S-1458

**[MEMO ITEM]**  
Subitemization of Visa Cardmember Service(01/08/15)

**B. The Liaison Capitol Hill DC**

Full Name (Last, First, Middle Initial)  
Mailing Address 415 New Jersey Avenue NW

City Washington State DC Zip Code 20001-2001

Purpose of Disbursement  
Meeting Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
01 / 08 / 2015

Amount of Each Disbursement this Period  
254.19

Transaction ID : B-S-1459

**[MEMO ITEM]**  
Subitemization of Visa Cardmember Service(01/08/15)

**C. Smith & Wollensky**

Full Name (Last, First, Middle Initial)  
Mailing Address 797 Third Ave at 49th Street

City New York State NY Zip Code 10022

Purpose of Disbursement  
Meeting Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
01 / 08 / 2015

Amount of Each Disbursement this Period  
103.33

Transaction ID : B-S-1460

**[MEMO ITEM]**  
Subitemization of Visa Cardmember Service(01/08/15)

**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 66 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Del Friscos</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 1426 Chestnut Street		Amount of Each Disbursement this Period 270.33
City Philadelphia	State PA	
Zip Code 19102-2505	Purpose of Disbursement Meeting Expense	Transaction ID : B-S-1464
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Reservations.HersheyPA</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 950 W Hershey Park Drive		Amount of Each Disbursement this Period 265.29
City Hershey	State PA	
Zip Code 17033-2424	Purpose of Disbursement Travel Expense	Transaction ID : B-S-1449
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 2955 Market Street		Amount of Each Disbursement this Period 641
City Philadelphia	State PA	
Zip Code 19104-2828	Purpose of Disbursement Travel Expense	Transaction ID : B-S-1450
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(01/08/15)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Campaign Financial Services**

Full Name (Last, First, Middle Initial)  
Mailing Address 7315 Wisconsin Avenue  
Suite 310

City Bethesda State MD Zip Code 20814-3202

Purpose of Disbursement  
Merchandise/Service Return

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 08 / 2015

Amount of Each Disbursement this Period  
-157.5

Transaction ID : B-S-1471

**[MEMO ITEM]**  
Subitemization of Visa Cardmember Service(01/08/15)

**B. Liberty Mutual Insurance**

Full Name (Last, First, Middle Initial)  
Mailing Address 9450 Seward Road

City Fairfield State OH Zip Code 45014-5412

Purpose of Disbursement  
Insurance Expense

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 13 / 2015

Amount of Each Disbursement this Period  
1215.75

Transaction ID : B-E-12555

**c. Line Systems Inc**

Full Name (Last, First, Middle Initial)  
Mailing Address 1645 W Chester Pike  
Suite 200

City West Chester State PA Zip Code 19382-7955

Purpose of Disbursement  
Telephone Expense

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 15 / 2015

Amount of Each Disbursement this Period  
4.99

Transaction ID : B-E-12558

**SUBTOTAL** of Disbursements This Page (optional)..... 1220.74

**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 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pennsylvania Building Trades Council</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 904 N 2nd Street		Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-12559</b>
City Harrisburg	State PA Zip Code 17102-3119	
Purpose of Disbursement Advertising	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ReadyTalk</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 1598 Wynkoop Street		Amount of Each Disbursement this Period 10.2 <b>Transaction ID : B-E-12560</b>
City Denver	State CO Zip Code 80202-1130	
Purpose of Disbursement Telephone Expense	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Saul Ewing LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 1500 Market Street Floor 38		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-12556</b>
City Philadelphia	State PA Zip Code 19102-2128	
Purpose of Disbursement Refund of Excess Contribution	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1510.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 102			
	<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)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address 1100 Adams Avenue		Amount of Each Disbursement this Period 195.14 <b>Transaction ID : B-E-12541</b>
City Norristown State PA Zip Code 19403-2404	Purpose of Disbursement Payroll Service Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address 1100 Adams Avenue		Amount of Each Disbursement this Period 1518.24 <b>Transaction ID : B-E-12542</b>
City Norristown State PA Zip Code 19403-2404	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address 1100 Adams Avenue		Amount of Each Disbursement this Period 98.39 <b>Transaction ID : B-E-12545</b>
City Norristown State PA Zip Code 19403-2404	Purpose of Disbursement Payroll Service Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1811.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address 1100 Adams Avenue		Amount of Each Disbursement this Period 1516.59 <b>Transaction ID : B-E-12546</b>
City Norristown	State PA	
Zip Code 19403-2404	Purpose of Disbursement Payroll Taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ms. Meredith V Buettner</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address 70 Fahnestock Road		Amount of Each Disbursement this Period 1740.44 <b>Transaction ID : B-E-12543</b>
City Malvern	State PA	
Zip Code 19355-2133	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Ms. Meredith V Buettner</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2015
Mailing Address 70 Fahnestock Road		Amount of Each Disbursement this Period 1740.45 <b>Transaction ID : B-E-12547</b>
City Malvern	State PA	
Zip Code 19355-2133	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4997.48
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 102			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ivana Wolfe</b>		Date of Disbursement MM / DD / YYYY 01 / 16 / 2015
Mailing Address 1215 N 13th Street		Amount of Each Disbursement this Period 1161.46 <b>Transaction ID : B-E-12544</b>
City Reading	State PA Zip Code 19604-2018	
Purpose of Disbursement Administrative/Salary/Overhead: Salary		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ivana Wolfe</b>		Date of Disbursement MM / DD / YYYY 01 / 16 / 2015
Mailing Address 1215 N 13th Street		Amount of Each Disbursement this Period 1161.48 <b>Transaction ID : B-E-12548</b>
City Reading	State PA Zip Code 19604-2018	
Purpose of Disbursement Administrative/Salary/Overhead: Salary		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Bureau of Business Trust Fund Taxes</b>		Date of Disbursement MM / DD / YYYY 01 / 21 / 2015
Mailing Address PO Box 280437		Amount of Each Disbursement this Period 126 <b>Transaction ID : B-E-12536</b>
City Harrisburg	State PA Zip Code 17128-0437	
Purpose of Disbursement Administrative/Salary/Overhead: Use Tax		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2448.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Action of PA**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 2465

City West Chester State PA Zip Code 19380-0301

Purpose of Disbursement Contribution  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 22 / 2015

Amount of Each Disbursement this Period: 250

Transaction ID : B-E-12563

Category/Type: 001

**B. Montgomery County Republican Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 860 Penllyn Blue Bell Pike Suite 240

City Blue Bell State PA Zip Code 19422-1676

Purpose of Disbursement Contribution  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 22 / 2015

Amount of Each Disbursement this Period: 1000

Transaction ID : B-E-12561

Category/Type: 001

**c. The Friends Of The NRA**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 10053

City Lancaster State PA Zip Code 17605-0053

Purpose of Disbursement Contribution  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 22 / 2015

Amount of Each Disbursement this Period: 250

Transaction ID : B-E-12562

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... 1500.00

**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 73 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Chambers Group</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2015
Mailing Address 147 Pennsylvania Avenue		Amount of Each Disbursement this Period 4694.74 <b>Transaction ID : B-E-12564</b>
City Malvern State PA Zip Code 19355-2496	Purpose of Disbursement Printing Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. The Theodore Company</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2015
Mailing Address PO Box 320412		Amount of Each Disbursement this Period 7663.25 <b>Transaction ID : B-E-12565</b>
City Alexandria State VA Zip Code 22320-4412	Purpose of Disbursement Fundraising Commissions Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Delaware County GOP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address 323 W Front Street		Amount of Each Disbursement this Period 3000 <b>Transaction ID : B-E-12566</b>
City Media State PA Zip Code 19063-2314	Purpose of Disbursement Contribution Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15357.99
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pa GOP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address 112 State Street		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-12567</b>
City Harrisburg	State PA Zip Code 17101-1024	
Purpose of Disbursement Contribution	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Savings Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 35 E Baltimore Avenue		Amount of Each Disbursement this Period 3.5 <b>Transaction ID : B-E-12568</b>
City Media	State PA Zip Code 19063-2927	
Purpose of Disbursement Service Charge	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2015
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 2100 <b>Transaction ID : B-E-12525</b>
City Washington	State DC Zip Code 20003-1164	
Purpose of Disbursement Software License	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2603.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Delcorep, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2015
Mailing Address Front Street		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-12522</b>
City Media	State PA	
Zip Code 19063	Purpose of Disbursement Administrative/Salary/Overhead: Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Merves Amon &amp; Barsz LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2015
Mailing Address 50 S Providence Road		Amount of Each Disbursement this Period 3500 <b>Transaction ID : B-E-12521</b>
City Media	State PA	
Zip Code 19063-3531	Purpose of Disbursement Compliance Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Springfield Country Club</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2015
Mailing Address 400 W Sproul Road		Amount of Each Disbursement this Period 521.06 <b>Transaction ID : B-E-12526</b>
City Springfield	State PA	
Zip Code 19064-2018	Purpose of Disbursement Fundraising Event Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4521.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Theodore Company</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2015
Mailing Address PO Box 320412		Amount of Each Disbursement this Period 5537.2 <b>Transaction ID : B-E-12523</b>
City Alexandria	State VA	
Zip Code 22320-4412	Purpose of Disbursement Fundraising Expense Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. The Theodore Company</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2015
Mailing Address PO Box 320412		Amount of Each Disbursement this Period 2000 <b>Transaction ID : B-E-12524</b>
City Alexandria	State VA	
Zip Code 22320-4412	Purpose of Disbursement Fundraising Retainer	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Ricoh USA</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2015
Mailing Address 6700 Sugarloaf Parkway		Amount of Each Disbursement this Period 82.96 <b>Transaction ID : B-E-12535</b>
City Duluth	State GA	
Zip Code 30097-4925	Purpose of Disbursement Copying Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7620.16
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. iContribute, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015
Mailing Address PO Box 8522		Amount of Each Disbursement this Period 70 <b>Transaction ID : B-E-12584</b>
City Falls Church	State VA Zip Code 22041-8522	
Purpose of Disbursement Credit Card Fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Comcast Cable</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2015
Mailing Address PO Box 3005		Amount of Each Disbursement this Period 200.16 <b>Transaction ID : B-E-12572</b>
City Southeastern	State PA Zip Code 19398-3005	
Purpose of Disbursement Cable Service	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2015
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 255.11 <b>Transaction ID : B-E-12571</b>
City Lehigh Valley	State PA Zip Code 18002-5505	
Purpose of Disbursement Telephone Expense	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	525.27
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Visa Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2015
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 494.47
City Saint Louis	State MO	Zip Code 63179-0408
Purpose of Disbursement Credit Card	Category/ Type 001	
Candidate Name		Transaction ID : B-E-12569
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:	Original vendors exceeding reporting threshold itemized as memo transactions.	

Full Name (Last, First, Middle Initial) <b>B. Bobby Vans</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2015
Mailing Address 809 15th Street NW		Amount of Each Disbursement this Period 461.45
City Washington	State DC	Zip Code 20005-2203
Purpose of Disbursement Meeting Expense	Category/ Type	
Candidate Name		Transaction ID : B-S-1473
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of Visa Cardmember Service(02/09/15)	

Full Name (Last, First, Middle Initial) <b>c. Visa Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2015
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 70.17
City Saint Louis	State MO	Zip Code 63179-0408
Purpose of Disbursement Credit Card	Category/ Type 001	
Candidate Name		Transaction ID : B-E-12570
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:	Original vendors exceeding reporting threshold itemized as memo transactions.	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	564.64
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 102			
	<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)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Delaware County Young Republicans</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2015
Mailing Address 323 W Front Street			Amount of Each Disbursement this Period 360 <b>Transaction ID : B-E-12582</b>
City Media	State PA	Zip Code 19063-2314	
Purpose of Disbursement Advertising & Event Tickets		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address 1100 Adams Avenue			Amount of Each Disbursement this Period 98.39 <b>Transaction ID : B-E-12595</b>
City Norristown	State PA	Zip Code 19403-2404	
Purpose of Disbursement Payroll Service Fee		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address 1100 Adams Avenue			Amount of Each Disbursement this Period 1480.67 <b>Transaction ID : B-E-12596</b>
City Norristown	State PA	Zip Code 19403-2404	
Purpose of Disbursement Payroll Taxes		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1939.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address 1100 Adams Avenue		Amount of Each Disbursement this Period 1124.38
City Norristown State PA Zip Code 19403-2404	Purpose of Disbursement Payroll Taxes 001 Category/Type	
Candidate Name		Transaction ID : B-E-12599
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ReadyTalk</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address 1598 Wynkoop Street		Amount of Each Disbursement this Period 37.04
City Denver State CO Zip Code 80202-1130	Purpose of Disbursement Telephone Expense 001 Category/Type	
Candidate Name		Transaction ID : B-E-12585
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Ms. Meredith V Buettner</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address 70 Fahnestock Road		Amount of Each Disbursement this Period 1740.44
City Malvern State PA Zip Code 19355-2133	Purpose of Disbursement Administrative/Salary/Overhead: Salary 001 Category/Type	
Candidate Name		Transaction ID : B-E-12597
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2901.86
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms. Meredith V Buettner</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address 70 Fahnestock Road		Amount of Each Disbursement this Period 2105.12 <b>Transaction ID : B-E-12600</b>
City Malvern State PA Zip Code 19355-2133	Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ivana Wolfe</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2015
Mailing Address 1215 N 13th Street		Amount of Each Disbursement this Period 1161.46 <b>Transaction ID : B-E-12598</b>
City Reading State PA Zip Code 19604-2018	Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Pioneer Political Action Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2015
Mailing Address 701 8th Street NW Suite 500		Amount of Each Disbursement this Period 2648.4 <b>Transaction ID : B-I-12591</b>
City Washington State DC Zip Code 20001-3965	Purpose of Disbursement Inkind: in-kind 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5914.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 102		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Horsham Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address PO Box 95		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-12609</b>
City Horsham	State PA	
Zip Code 19044-0095	Purpose of Disbursement Contribution	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Upper Darby High School After-Prom</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address PO Box 403		Amount of Each Disbursement this Period 750 <b>Transaction ID : B-E-12610</b>
City Pilgrim Gardens	State PA	
Zip Code 19026-0403	Purpose of Disbursement Contribution	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Ricoh USA</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2015
Mailing Address 6700 Sugarloaf Parkway		Amount of Each Disbursement this Period 41.96 <b>Transaction ID : B-E-12618</b>
City Duluth	State GA	
Zip Code 30097-4925	Purpose of Disbursement Copying Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1291.96
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Davis For Mayor</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address PO Box 1124		Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-12621</b>
City Montgomery	State AL	
Zip Code 36101-1124	Purpose of Disbursement Contribution	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Engage LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 814 King Street Suite 400		Amount of Each Disbursement this Period 299 <b>Transaction ID : B-E-12619</b>
City Alexandria	State VA	
Zip Code 22314-3069	Purpose of Disbursement Administrative/Salary/Overhead: Website	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Sacred Heart</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 1504 Fairview Avenue		Amount of Each Disbursement this Period 250 <b>Transaction ID : B-E-12620</b>
City Havertown	State PA	
Zip Code 19083-4225	Purpose of Disbursement Contribution	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1549.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 102			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Patrick L. Meehan</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 1029 Edmonds Avenue		Amount of Each Disbursement this Period 551.85 <b>Transaction ID : B-E-12623</b>
City Drexel Hill	State PA Zip Code 19026-2501	
Purpose of Disbursement Mileage Reimbursement	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015
Mailing Address 1100 Adams Avenue		Amount of Each Disbursement this Period 103.22 <b>Transaction ID : B-E-12625</b>
City Norristown	State PA Zip Code 19403-2404	
Purpose of Disbursement Payroll Service Fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015
Mailing Address 1100 Adams Avenue		Amount of Each Disbursement this Period 1491.93 <b>Transaction ID : B-E-12626</b>
City Norristown	State PA Zip Code 19403-2404	
Purpose of Disbursement Payroll Taxes	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2147.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms. Meredith V Buettner</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2015
Mailing Address 70 Fahnestock Road		Amount of Each Disbursement this Period 894.88 <b>Transaction ID : B-E-12627</b>
City Malvern State PA Zip Code 19355-2133	Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ms. Meredith V Buettner</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2015
Mailing Address 70 Fahnestock Road		Amount of Each Disbursement this Period 1740.44 <b>Transaction ID : B-E-12628</b>
City Malvern State PA Zip Code 19355-2133	Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Ivana Wolfe</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2015
Mailing Address 1215 N 13th Street		Amount of Each Disbursement this Period 618.32 <b>Transaction ID : B-E-12629</b>
City Reading State PA Zip Code 19604-2018	Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3253.64
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 102		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. United Savings Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2015
Mailing Address 35 E Baltimore Avenue		Amount of Each Disbursement this Period 3 <b>Transaction ID : B-E-12624</b>
City Media	State PA Zip Code 19063-2927	
Purpose of Disbursement Service Charge	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Delcorep, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address Front Street		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-12631</b>
City Media	State PA Zip Code 19063	
Purpose of Disbursement Administrative/Salary/Overhead: Rent	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Merves Amon &amp; Barsz LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address 50 S Providence Road		Amount of Each Disbursement this Period 3500 <b>Transaction ID : B-E-12632</b>
City Media	State PA Zip Code 19063-3531	
Purpose of Disbursement Compliance Services	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4003.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address 1100 Adams Avenue		Amount of Each Disbursement this Period 310.98 <b>Transaction ID : B-E-12633</b>
City Norristown	State PA	
Zip Code 19403-2404	Purpose of Disbursement Payroll Taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ivana Wolfe</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2015
Mailing Address 1215 N 13th Street		Amount of Each Disbursement this Period 543.15 <b>Transaction ID : B-E-12634</b>
City Reading	State PA	
Zip Code 19604-2018	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The Theodore Company</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address PO Box 320412		Amount of Each Disbursement this Period 9475.03 <b>Transaction ID : B-E-12637</b>
City Alexandria	State VA	
Zip Code 22320-4412	Purpose of Disbursement Fundraising Expense Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10329.16
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Theodore Company</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address PO Box 320412		Amount of Each Disbursement this Period 2000 <b>Transaction ID : B-E-12638</b>
City Alexandria	State VA	
Zip Code 22320-4412	Purpose of Disbursement Fundraising Retainer	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mr. Patrick L. Meehan</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2015
Mailing Address 1029 Edmonds Avenue		Amount of Each Disbursement this Period 30 <b>Transaction ID : B-E-12635</b>
City Drexel Hill	State PA	
Zip Code 19026-2501	Purpose of Disbursement Campaign Expense Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. iContribute, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2015
Mailing Address PO Box 8522		Amount of Each Disbursement this Period 175 <b>Transaction ID : B-E-12666</b>
City Falls Church	State VA	
Zip Code 22041-8522	Purpose of Disbursement Credit Card Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2205.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Victim Services Center**

Full Name (Last, First, Middle Initial)  
Mailing Address 325 Swede Street Suite 2

City Norristown State PA Zip Code 19401-4805

Purpose of Disbursement Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 06 / 2015

Amount of Each Disbursement this Period: 250

Transaction ID : B-E-12653

Category/Type: 001

**B. Ivana Wolfe**

Full Name (Last, First, Middle Initial)  
Mailing Address 1215 N 13th Street

City Reading State PA Zip Code 19604-2018

Purpose of Disbursement Mileage Reimbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 06 / 2015

Amount of Each Disbursement this Period: 117.1

Transaction ID : B-E-12654

Category/Type: 001

**c. Comcast Cable**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 3005

City Southeastern State PA Zip Code 19398-3005

Purpose of Disbursement Cable Service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 09 / 2015

Amount of Each Disbursement this Period: 201.21

Transaction ID : B-E-12659

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 568.31

**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 90 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Engage LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 814 King Street Suite 400		Amount of Each Disbursement this Period 299 <b>Transaction ID : B-E-12657</b>
City Alexandria State VA Zip Code 22314-3069	Purpose of Disbursement Administrative/Salary/Overhead: Website Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 236.97 <b>Transaction ID : B-E-12658</b>
City Lehigh Valley State PA Zip Code 18002-5505	Purpose of Disbursement Telephone Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Visa Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 179.73 <b>Transaction ID : B-E-12660</b>
City Saint Louis State MO Zip Code 63179-0408	Purpose of Disbursement Credit Card Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	715.70
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 91 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 164.73
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Meeting Expense	
Candidate Name	Category/Type	<b>Transaction ID : B-S-1477</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		<b>[MEMO ITEM]</b> Subitemization of Visa Cardmember Service(03/09/15)

Full Name (Last, First, Middle Initial) <b>B. Visa Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address PO Box 790408		Amount of Each Disbursement this Period 150
City Saint Louis State MO Zip Code 63179-0408	Purpose of Disbursement Credit Card	
Candidate Name	Category/Type 001	<b>Transaction ID : B-E-12661</b>
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:		Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>C. MailChimp</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 530 Means Street NW		Amount of Each Disbursement this Period 150
City Atlanta State GA Zip Code 30318-5793	Purpose of Disbursement Email Subscription	
Candidate Name	Category/Type	<b>Transaction ID : B-S-1478</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		<b>[MEMO ITEM]</b> Subitemization of Visa Cardmember Service(03/09/15)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

**A. Visa Cardmember Service**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 790408

City Saint Louis State MO Zip Code 63179-0408

Purpose of Disbursement Credit Card Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement 03 / 09 / 2015

Amount of Each Disbursement this Period 227.15

Transaction ID : B-E-12662

Original vendors exceeding reporting threshold itemized as memo transactions.

**B. Carmine's**

Full Name (Last, First, Middle Initial)  
Mailing Address 425 7th Street NW

City Washington State DC Zip Code 20004-2229

Purpose of Disbursement Meeting Expense Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement 03 / 09 / 2015

Amount of Each Disbursement this Period 227.15

Transaction ID : B-S-1479

[MEMO ITEM]  
Subitemization of Visa Cardmember Service(03/09/15)

**c. Visa Cardmember Service**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 790408

City Saint Louis State MO Zip Code 63179-0408

Purpose of Disbursement Credit Card Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement 03 / 09 / 2015

Amount of Each Disbursement this Period 5564.78

Transaction ID : B-E-12663

Original vendors exceeding reporting threshold itemized as memo transactions.

**SUBTOTAL** of Disbursements This Page (optional) ..... 5791.93

**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 93 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hotel Hershey</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 100 Hotel Road		Amount of Each Disbursement this Period 291.69
City Hershey	State PA	
Zip Code 17033-9507	Purpose of Disbursement Travel Expense	Transaction ID : B-S-1488
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(03/09/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paypal</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 2211 N 1st Street		Amount of Each Disbursement this Period 389
City San Jose	State CA	
Zip Code 95131-2021	Purpose of Disbursement Travel Expense	Transaction ID : B-S-1480
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(03/09/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PTC EZ Pass Auto</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 7631 Derry Street		Amount of Each Disbursement this Period 100
City Harrisburg	State PA	
Zip Code 17111-5232	Purpose of Disbursement Travel Expense	Transaction ID : B-S-1481
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(03/09/15)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 94 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. On Star</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2015
Mailing Address PO Box 1027		Amount of Each Disbursement this Period 29.9
City Warren	State MI	
Zip Code 48090-1027	Purpose of Disbursement Travel Expense	Transaction ID : B-S-1482
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(03/09/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2015
Mailing Address 201 E Jefferson Street		Amount of Each Disbursement this Period 3870.59
City Phoenix	State AZ	
Zip Code 85004-2412	Purpose of Disbursement Travel Expense	Transaction ID : B-S-1483
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(03/09/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Laz Parking</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2015
Mailing Address 2001 S Street NW Suite 610		Amount of Each Disbursement this Period 56
City Washington	State DC	
Zip Code 20009-1157	Purpose of Disbursement Travel Expense	Transaction ID : B-S-1485
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Cardmember Service(03/09/15)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 102			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 2955 Market Street		Amount of Each Disbursement this Period 202
City Philadelphia	State PA	
Zip Code 19104-2828	Purpose of Disbursement Travel Expense	<b>Transaction ID : B-S-1486</b>
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)	<b>[MEMO ITEM]</b> Subitemization of Visa Cardmember Service(03/09/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hilton Advance Purchase</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 7930 Jones Branch Drive		Amount of Each Disbursement this Period 588.86
City McLean	State VA	
Zip Code 22102-3388	Purpose of Disbursement Travel Expense	<b>Transaction ID : B-S-1489</b>
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)	<b>[MEMO ITEM]</b> Subitemization of Visa Cardmember Service(03/09/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. iContribute, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2015
Mailing Address PO Box 8522		Amount of Each Disbursement this Period 35
City Falls Church	State VA	
Zip Code 22041-8522	Purpose of Disbursement Credit Card Fee	<b>Transaction ID : B-E-12664</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	35.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 1100 Adams Avenue		Amount of Each Disbursement this Period 98.39
City Norristown State PA Zip Code 19403-2404	Purpose of Disbursement Payroll Service Fee	
Candidate Name	Category/Type 001	Transaction ID : B-E-12668
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 1100 Adams Avenue		Amount of Each Disbursement this Period 1103.33
City Norristown State PA Zip Code 19403-2404	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type 001	Transaction ID : B-E-12669
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Ms. Meredith V Buettner</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 70 Fahnstock Road		Amount of Each Disbursement this Period 1740.45
City Malvern State PA Zip Code 19355-2133	Purpose of Disbursement Administrative/Salary/Overhead: Salary	
Candidate Name	Category/Type 001	Transaction ID : B-E-12670
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2942.17
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 102			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ivana Wolfe</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 1215 N 13th Street		Amount of Each Disbursement this Period 618.32 <b>Transaction ID : B-E-12671</b>
City Reading	State PA Zip Code 19604-2018	
Purpose of Disbursement Administrative/Salary/Overhead: Salary		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Elwyn Foundation</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2015
Mailing Address 111 Elwyn Road		Amount of Each Disbursement this Period 1500 <b>Transaction ID : B-E-12665</b>
City Elwyn	State PA Zip Code 19063-4622	
Purpose of Disbursement Contribution		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ReadyTalk</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2015
Mailing Address 1598 Wynkoop Street		Amount of Each Disbursement this Period 41.13 <b>Transaction ID : B-E-12667</b>
City Denver	State CO Zip Code 80202-1130	
Purpose of Disbursement Telephone Expense		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2159.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 98 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. United States Treasury</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2015
Mailing Address 1160 W 1200 S		Amount of Each Disbursement this Period 711 <b>Transaction ID : B-E-12778</b>
City Ogden State UT Zip Code 84201-0001	Purpose of Disbursement Federal Tax Payment 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. iContribute, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015
Mailing Address PO Box 8522		Amount of Each Disbursement this Period 210 <b>Transaction ID : B-E-12672</b>
City Falls Church State VA Zip Code 22041-8522	Purpose of Disbursement Credit Card Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Chambers Group</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2015
Mailing Address 147 Pennsylvania Avenue		Amount of Each Disbursement this Period 352.03 <b>Transaction ID : B-E-12698</b>
City Malvern State PA Zip Code 19355-2496	Purpose of Disbursement Postage Expense 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1273.03
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 99 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Leadership Matters For America PAC, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address PO Box 98		Amount of Each Disbursement this Period 8000 <b>Transaction ID : B-E-12700</b>
City Mendham	State NJ	
Zip Code 07945-0098	Purpose of Disbursement Contribution	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ricoh USA</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address 6700 Sugarloaf Parkway		Amount of Each Disbursement this Period 71.4 <b>Transaction ID : B-E-12699</b>
City Duluth	State GA	
Zip Code 30097-4925	Purpose of Disbursement Copying Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 1100 Adams Avenue		Amount of Each Disbursement this Period 93.77 <b>Transaction ID : B-E-12703</b>
City Norristown	State PA	
Zip Code 19403-2404	Purpose of Disbursement Payroll Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8165.17
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 1100 Adams Avenue		Amount of Each Disbursement this Period 868 <b>Transaction ID : B-E-12704</b>
City Norristown State PA Zip Code 19403-2404	Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Ms. Meredith V Buettner</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 70 Fahnestock Road		Amount of Each Disbursement this Period 1740.44 <b>Transaction ID : B-E-12705</b>
City Malvern State PA Zip Code 19355-2133	Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>c. The Ripon Society</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2015
Mailing Address 1155 15th Street NW Suite 550		Amount of Each Disbursement this Period 339.25 <b>Transaction ID : B-E-12701</b>
City Washington State DC Zip Code 20005-2713	Purpose of Disbursement Travel Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2947.69
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms. Caitlin Ganley</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2015
Mailing Address 63-1 Drexelbrook Drive		Amount of Each Disbursement this Period 12450 <b>Transaction ID : B-E-12702</b>
City Drexel Hill	State PA	
Zip Code 19026-5387	Purpose of Disbursement Political Campaign Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Marple Newtown Parade Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 814 Ellis Avenue		Amount of Each Disbursement this Period 215 <b>Transaction ID : B-E-12771</b>
City Newtown Square	State PA	
Zip Code 19073-3906	Purpose of Disbursement Advertising	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The Chambers Group</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 147 Pennsylvania Avenue		Amount of Each Disbursement this Period 469.58 <b>Transaction ID : B-E-12774</b>
City Malvern	State PA	
Zip Code 19355-2496	Purpose of Disbursement Printing Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13134.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 102	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pat Meehan for Congress**

Full Name (Last, First, Middle Initial) <b>A. United Savings Bank</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2015</b>
Mailing Address <b>35 E Baltimore Avenue</b>		Amount of Each Disbursement this Period <b>4.25</b>
City <b>Media</b> State <b>PA</b> Zip Code <b>19063-2927</b>	Purpose of Disbursement <b>Service Fee</b> <input type="text" value="001"/> Category/Type	
Candidate Name		Transaction ID : <b>B-E-12777</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</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	<input type="text"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement 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	<input type="text"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4.25</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>147764.30</b>