

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Phillips For Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	<input type="text" value="95105.50"/>	<input type="text" value="95105.50"/>
(b) Total Contribution Refunds (from Line 20(d))	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	<input type="text" value="95105.50"/>	<input type="text" value="95105.50"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<input type="text" value="1596.61"/>	<input type="text" value="1596.61"/>
(b) Total Offsets to Operating Expenditures (from Line 14).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	<input type="text" value="1596.61"/>	<input type="text" value="1596.61"/>
8. Cash on Hand at Close of Reporting Period (from Line 27).....	<input type="text" value="93508.89"/>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Phillips For Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	87790.00	87790.00
(ii) Unitemized.....	7315.50	7315.50
(iii) TOTAL of contributions from individuals ▶	95105.50	95105.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	95105.50	95105.50
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	95105.50	95105.50

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1596.61	1596.61
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	1596.61	1596.61

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	95105.50
25. SUBTOTAL (add Line 23 and Line 24).....	95105.50
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1596.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	93508.89

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

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

FOR LINE NUMBER: PAGE 5 OF 25
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Lincoln Diaz-Balart

Mailing Address 611 Ocean Drive
Apartment 7

City State Zip Code
Key Biscayne FL 33149

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

Name of Employer Occupation
Self Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2015

Transaction ID : A-143

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 218 Peruville Road

City State Zip Code
Freeville NY 13068

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

Name of Employer Occupation
Park Outdoor Advertising Sales Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2015

Transaction ID : A-141

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mr. Norman Bobrow

Mailing Address 18106 Tudor Road

City State Zip Code
Jamaica NY 11432-1447

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

Name of Employer Occupation
Norman Bobrow & Co. Real Estate President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : A-144

Amount of Each Receipt this Period
 2000.00

Memo Item

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 6 OF 25
	<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)
Phillips For Congress

Full Name (Last, First, Middle Initial) Rev Allen Martin		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 23 / 2015	
Mailing Address 10095 Lawyers Road		Transaction ID : A-142	
City Vienna	State VA	Zip Code 22181	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer The Livingston Group	Occupation Trustee		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) Mr. Allen Roth		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 23 / 2015	
Mailing Address 255 Raymond Street		Transaction ID : A-96	
City Rockville Centre	State NY	Zip Code 11570	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer RSL Management	Occupation Administrator		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) Janelle Kovacevich		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 26 / 2015	
Mailing Address 6618 29th St N		Transaction ID : A-10	
City Arlington	State VA	Zip Code 22213	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self	Occupation Stay at home mom		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

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

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

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

FOR LINE NUMBER: PAGE 7 OF 25
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Lawrence Brinker

Mailing Address 3048 Norfolk Road

City Binghamton State NY Zip Code 13903

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

Name of Employer NUAIR Alliance Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : A-13

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ms. Sandra Coghlan

Mailing Address 124 Crocker Hill Rd

City Binghamton State NY Zip Code 13904

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

Name of Employer None Occupation Home Maker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

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

Transaction ID : A-117

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Ms. Sandra Coghlan

Mailing Address 124 Crocker Hill Rd

City Binghamton State NY Zip Code 13904

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

Name of Employer None Occupation Home Maker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

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

Transaction ID : A-118

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

5650.00

**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 25
	<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)
Phillips For Congress

Full Name (Last, First, Middle Initial) Mr. Roy Park		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2015
Mailing Address 1 Hampton Hill Lane		Transaction ID : A-139
City Ithaca	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Park Outdoor Advertising	Occupation Owner	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Matthew Salanger		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2015
Mailing Address 805 River Road		Transaction ID : A-12
City Binghamton	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer UHS	Occupation Healthcare Administration	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Colleen Sullivan		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2015
Mailing Address 2709 North Somerset Street		Transaction ID : A-16
City Arlington	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation Homemaker	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 25
	<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)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Cornelius J Sullivan

Mailing Address 335 Ridgewood Avenue
Apt 2K

City State Zip Code
Glen Ridge NJ 07028

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : A-121

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 2709 North Somerset Street

City State Zip Code
Arlington VA 22213

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

Name of Employer Occupation
Skadden, Arps, Slate, Meagher & Flom L Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : A-17

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mr. Lewis Topper

Mailing Address 3605 Campmineola Rd

City State Zip Code
Mattituck NY 11952

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

Name of Employer Occupation
Fast Food Systems, INC. Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

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

Transaction ID : A-93

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

3950.00

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

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

NAME OF COMMITTEE (In Full)
Phillips For Congress

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

Mailing Address 3605 Campmineola Rd

City State Zip Code
Mattituck NY 11952

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

Name of Employer Occupation
Fast Food Systems, INC. Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

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

Transaction ID : A-94

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mr. Jeffrey Coghlan

Mailing Address 124 Crocker Hill Road

City State Zip Code
Binghamton NY 13904

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

Name of Employer Occupation
Self Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

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

Transaction ID : A-115

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mr. Jeffrey Coghlan

Mailing Address 124 Crocker Hill Road

City State Zip Code
Binghamton NY 13904

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

Name of Employer Occupation
Self Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

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

Transaction ID : A-116

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

8100.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 11 OF 25

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Keli Cooper

Mailing Address 112 Crocker Hill Road

City Binghamton State NY Zip Code 13904

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

Name of Employer Self Occupation Restaurant Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

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

Transaction ID : A-81

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ms. Keli Cooper

Mailing Address 112 Crocker Hill Road

City Binghamton State NY Zip Code 13904

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

Name of Employer Self Occupation Restaurant Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

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

Transaction ID : A-82

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 4616 Gibson St

City Houston State TX Zip Code 77007

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

Name of Employer USGBC Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

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

Transaction ID : A-83

Amount of Each Receipt this Period
500.00

Memo Item

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 12 OF 25
	<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)
Phillips For Congress

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

Mailing Address 336 Wild Willow Drive

City El Paso State TX Zip Code 79922

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

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

Transaction ID : A-18

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mr. Armond George

Mailing Address 1107 Pietro Dr

City Endicott State NY Zip Code 13760

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

Name of Employer Merrill Lynch/BAC Occupation Financial Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : A-85

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mr. Wayne Jennings

Mailing Address 63 Carroll Street

City Binghamton State NY Zip Code 13901-3512

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

Name of Employer Jennings Environmental Management Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : A-101

Amount of Each Receipt this Period
500.00

Memo Item

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

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

3450.00

**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 25
	<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)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Kenneth Kunkel		Date of Receipt M M / D D / Y Y Y Y Y 12 / 29 / 2015	
Mailing Address 1600 Old Route 13		Transaction ID : A-103	
City New Woodstock	State NY	Zip Code 13122	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer None	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Constance White		Date of Receipt M M / D D / Y Y Y Y Y 12 / 29 / 2015	
Mailing Address PO Box 291		Transaction ID : A-122	
City Marathon	State NY	Zip Code 13803	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer None	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth Sweeney Akel		Date of Receipt M M / D D / Y Y Y Y Y 12 / 30 / 2015	
Mailing Address 283 Riverside Dr		Transaction ID : A-119	
City Binghamton	State NY	Zip Code 13905	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer None	Occupation Home Maker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

SUBTOTAL of Receipts This Page (optional).....	3450.00
TOTAL This Period (last page this line number only).....	3450.00

**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 25
	<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)
Phillips For Congress

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

Mailing Address 283 Riverside Drive

City Binghamton State NY Zip Code 13905-4060

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

Name of Employer Akel Wholesale Grocery, Inc. Occupation Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : A-120

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 601 N Fairfax St 402

City Alexandria State VA Zip Code 22314

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

Name of Employer Prime Policy Group Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : A-107

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 301 Letort Road

City Millersville State PA Zip Code 17551

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

Name of Employer Clymer Conrad, PC Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : A-69

Amount of Each Receipt this Period
250.00

Memo Item

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

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

3950.00

**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 25
	<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)
Phillips For Congress

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

Mailing Address 336 Wild Willow Drive

City El Paso State TX Zip Code 79922

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : A-19

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 336 Wild Willow Drive

City El Paso State TX Zip Code 79922

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

Name of Employer Self Occupation Medical Sonographer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : A-60

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 336 Wild Willow Drive

City El Paso State TX Zip Code 79922

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

Name of Employer Self Occupation Medical Sonographer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : A-61

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

8100.00

**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 25
	<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)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Ron Kradijan

Mailing Address 523 Columbia Drive

City Johnson City State NY Zip Code 13790

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

Name of Employer Kradro Realty LLC Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : A-159

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 58-68 South Service Road

City Melville State NY Zip Code 11747

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

Name of Employer Law Offices of Brian Thomas McCarthy P Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : A-75

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 3214 Northampton Street Northwest

City Washington State DC Zip Code 20015

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

Name of Employer WM Fundraising & Event Planning Occupation Event Planning

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : A-149

Amount of Each Receipt this Period
250.00

Memo Item

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 25
	<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)
Phillips For Congress

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

Mailing Address 21 Azalea Drive

City Apalachin State NY Zip Code 13732

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

Name of Employer None Occupation Home Maker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : A-73

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mr. Matthew Sillick

Mailing Address 24 Whippoorwill Way

City Belle Mead State NJ Zip Code 08502

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

Name of Employer Ingredion inc Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : A-64

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mr. Wayne Berman

Mailing Address 3055 Whitehaven Street NW

City Washington State DC Zip Code 20008-3613

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

Name of Employer Blackstone Group Occupation Managing Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : A-41

Amount of Each Receipt this Period
1000.00

Memo Item

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 18 OF 25
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Brian Coveleskie

Mailing Address 19 O'Day Drive

City State Zip Code
Endicott NY 13760

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

Name of Employer Occupation
UHS RN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : A-161

Amount of Each Receipt this Period
2695.00

Memo Item

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

Mailing Address 19 O'Day Drive

City State Zip Code
Endicott NY 13760

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

Name of Employer Occupation
UHS RN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : A-162

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Ms. Mary Coveleskie

Mailing Address 19 O'Day Drive

City State Zip Code
Endicott NY 13760

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

Name of Employer Occupation
none Home Maker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5395.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : A-131

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

8095.00

**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 25
	<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)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Mary Coveleskie

Mailing Address 19 O'Day Drive

City State Zip Code
Endicott NY 13760

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

Name of Employer none Occupation Home Maker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5395.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : A-132

Amount of Each Receipt this Period
2695.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mr. Michael Fidler

Mailing Address 80 Hanson Road

City State Zip Code
Deposit NY 13754

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : A-48

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1350 West Kennicott Drive

City State Zip Code
Lake Forest IL 60045

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

Name of Employer Retired Occupation Educator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : A-45

Amount of Each Receipt this Period
2000.00

Memo Item

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

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

5195.00

**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 25
	<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)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Neil Guiles

Mailing Address 11 Julliard St

City Greene State NY Zip Code 13778

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

Name of Employer Self Occupation Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : A-135

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mary Louise Monaghan

Mailing Address 4320 New Hope Rd

City New Haven State KY Zip Code 40051-5213

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

Name of Employer None Occupation homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : A-62

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address PO box 246

City Port crane State NY Zip Code 13833

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

Name of Employer Broome county Occupation Public servant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : A-40

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 25
	<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)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Marc Newman

Mailing Address **PO Box 932**

City **Vestal** State **NY** Zip Code **13850**

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

Name of Employer **Newman Development** Occupation **Managing Partner**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : A-114

Amount of Each Receipt this Period
1500.00

Memo Item

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

Mailing Address **69 Bennett Avenue**

City **Binghamton** State **NY** Zip Code **13905**

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

Name of Employer **Lachman & Gorton** Occupation **Attorney**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : A-98

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mr. Christopher Phillips

Mailing Address **PO Box 255**

City **Thoreau** State **NM** Zip Code **87323**

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

Name of Employer **Thoreau Middle School** Occupation **School Counselor**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : A-133

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

4450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 25
	<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)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Mr. Christopher Phillips		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2015
Mailing Address PO Box 255		Transaction ID : A-134
City State Zip Code THoreau NM 87323	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Thoreau Middle School School Counselor	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) B. Mr. George C Phillips		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2015
Mailing Address 311 Norton Ave		Transaction ID : A-36
City State Zip Code Endicott NY 13760	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation none retired	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) C. Mr. George C Phillips		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2015
Mailing Address 311 Norton Ave		Transaction ID : A-37
City State Zip Code Endicott NY 13760	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation none retired	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

SUBTOTAL of Receipts This Page (optional).....	8100.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 25
	<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)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Mary-Lou Phillips		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2015	
Mailing Address 311 Norton Avenue		Transaction ID : A-145	
City Endicott	State NY	Zip Code 13760	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer None	Occupation Homemaker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		
<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B. Mary-Lou Phillips		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2015	
Mailing Address 311 Norton Avenue		Transaction ID : A-146	
City Endicott	State NY	Zip Code 13760	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer None	Occupation Homemaker		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		
<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) C. James Smith		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2015	
Mailing Address 12 Eaglesway		Transaction ID : A-51	
City Middletown	State NY	Zip Code 10940	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Advance testing	Occupation Engineer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<input type="checkbox"/> Memo Item			

SUBTOTAL of Receipts This Page (optional).....	6400.00
TOTAL This Period (last page this line number only).....	6400.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 24 OF 25

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NAME OF COMMITTEE (In Full)
Phillips For Congress

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

Mailing Address 25 Woodland Road

City Binghamton State NY Zip Code 13901

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

Name of Employer New York State Occupation Government

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : A-42

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ms. Molly Wilkinson

Mailing Address 1520 Mt Eagle Place

City Alexandria State VA Zip Code 22302

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
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : A-59

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Memo Item

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

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

2000.00

87790.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 25			
	<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)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. PayPal			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015		
Mailing Address 2211 North 1st Street			Amount of Each Disbursement this Period 1596.61		
City San Jose	State CA	Zip Code 95131	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Credit card fees		Category/ Type 001			
Candidate Name			Transaction ID : B-704		
Office Sought: <input type="checkbox"/> House <input 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.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			Amount of Each Disbursement this Period		
City	State	Zip Code	Memo Item <input type="checkbox"/>		
Purpose of Disbursement		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

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

SUBTOTAL of Disbursements This Page (optional)	1596.61
TOTAL This Period (last page this line number only)	1596.61