

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Citizens for Boyle

ADDRESS (number and street)

PO Box 14310

Check if different than previously reported. (ACC)

Philadelphia

PA

19115

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00543363

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

PA

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 2022

through

M M /

D D /

Y Y Y Y 2022

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

Jackson, Sue, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Jackson, Sue, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Citizens for Boyle

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))....	1263.00	1283.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1263.00	1283.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	35613.11	68912.36
(b) Total Offsets to Operating Expenditures (from Line 14).....	55.50	55.50
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	35557.61	68856.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2344941.15	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Citizens for Boyle

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 29 / 2022 To: M M / D D / Y Y Y Y 12 / 31 / 2022

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).....	0.00	0.00
(ii) Unitemized.....	263.00	283.00
(iii) TOTAL of contributions from individuals ▶	263.00	283.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1263.00	1283.00
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.)	55.50	55.50
15. OTHER RECEIPTS (Dividends, Interest, etc.)	100716.33	100716.33
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	102034.83	102054.83

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 15

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	35613.11	68912.36
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	15000.00	15000.00
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) ►	50613.11	83912.36

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2293519.43
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	102034.83
25. SUBTOTAL (add Line 23 and Line 24).....	2395554.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	50613.11
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2344941.15

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

Form/Schedule: F3N
Transaction ID :

The committee confirms that no contributor reported on Line 11(a)(ii) on this report exceeded \$200 for the 2024 election cycle as of 12/31/2022.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 6 OF 15		
<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)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF FAMILY PHYSICIANS POLITICAL ACTION COMMITTEE

Mailing Address 1133 Connecticut Ave NW
Ste 1100

City Washington	State DC	Zip Code 20036-4342
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00411553

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

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 20 / 2022

Transaction ID : 12572627

Amount of Each Receipt this Period
1000.00

Memo Item

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

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).....▶	1000.00
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: PAGE 7 OF 15
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

A. Full Name (Last, First, Middle Initial)
Capital One Bank

Mailing Address 336 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1147

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

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 948.08

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2022

Transaction ID : 12572630

Amount of Each Receipt this Period
 948.08

Memo Item

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

Mailing Address 5951 Lockett Ct Ste A-1

City El Paso State TX Zip Code 79932-1882

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

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 98346.29

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2022

Transaction ID : 12572631

Amount of Each Receipt this Period
 98346.29

Memo Item

C. Full Name (Last, First, Middle Initial)
Capital One Bank

Mailing Address 336 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1147

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

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2370.04

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2022

Transaction ID : 12572629

Amount of Each Receipt this Period
 1421.96

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100716.33
TOTAL This Period (last page this line number only).....▶	100716.33

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 8 OF 15	
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Carpenters' Legislative Improvement Committee			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2022	
Mailing Address 101 Constitution Ave NW FI 10			FEC Identification Number C C0001016	
City Washington	State DC	Zip Code 20001-2153	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement Site Rental		Category/ Type	Transaction ID : 500848700	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Blue Wave Political Partners			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2022	
Mailing Address 514 Daniels St Ste 286			FEC Identification Number C	
City Raleigh	State NC	Zip Code 27605-1317	Amount of Each Disbursement this Period 2800.00	
Purpose of Disbursement Compliance Services		Category/ Type	Transaction ID : 500848702	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Capital One Bank			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2022	
Mailing Address 336 Pennsylvania Ave SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1147	Amount of Each Disbursement this Period 3122.02	
Purpose of Disbursement Credit Card Payment - See Below		Category/ Type	Transaction ID : 500848703	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	6222.02
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 15	
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Comcast Corporation			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2022	
Mailing Address 1701 John F Kennedy Blvd			FEC Identification Number C	
City Philadelphia	State PA	Zip Code 19103-2833	Amount of Each Disbursement this Period 181.50	
Purpose of Disbursement Telephone Expense		Category/ Type	Transaction ID : 500855171	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Comcast Corporation			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2022	
Mailing Address 1701 John F Kennedy Blvd			FEC Identification Number C	
City Philadelphia	State PA	Zip Code 19103-2833	Amount of Each Disbursement this Period 98.79	
Purpose of Disbursement Telephone Expense		Category/ Type	Transaction ID : 500855172	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. EZ Cater			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2022	
Mailing Address 40 Water St FL 5			FEC Identification Number C	
City Boston	State MA	Zip Code 02109-3604	Amount of Each Disbursement this Period 902.66	
Purpose of Disbursement Catering		Category/ Type	Transaction ID : 500855153	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 15	
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2022	
Mailing Address 10000 Roosevelt Blvd Ste 4			FEC Identification Number C	
City Philadelphia	State PA	Zip Code 19116-3904	Amount of Each Disbursement this Period 324.00	
Purpose of Disbursement Telephone Expense		Category/ Type	Transaction ID : 500855173	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. EZ Cater			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2022	
Mailing Address 40 Water St Fl 5			FEC Identification Number C	
City Boston	State MA	Zip Code 02109-3604	Amount of Each Disbursement this Period 306.56	
Purpose of Disbursement Catering		Category/ Type	Transaction ID : 500855154	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Staples			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2022	
Mailing Address 93 E Street Rd			FEC Identification Number C	
City Feasterville Trevoese	State PA	Zip Code 19053-6047	Amount of Each Disbursement this Period 490.72	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : 500855164	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 15	
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Hotels.Com			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2022	
Mailing Address 5400 Lbj Fwy Ste 500			FEC Identification Number C	
City Dallas	State TX	Zip Code 75240-1019	Amount of Each Disbursement this Period 204.24	
Purpose of Disbursement Lodging		Category/ Type	Transaction ID : 500855168	
Candidate Name		<input checked="" type="checkbox"/> Memo Item *		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. FirstData			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2022	
Mailing Address 5565 Glenridge Connector NE Ste 2000			FEC Identification Number C	
City Atlanta	State GA	Zip Code 30342-1651	Amount of Each Disbursement this Period 52.26	
Purpose of Disbursement Merchant Fee		Category/ Type	Transaction ID : 500848083	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Ide, Vanessa, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2022	
Mailing Address 1701 16Th St NW Apt 121			FEC Identification Number C	
City Washington	State DC	Zip Code 20009-3110	Amount of Each Disbursement this Period 26862.00	
Purpose of Disbursement Management Services		Category/ Type	Transaction ID : 500848704	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	26914.26
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 15	
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. FirstData		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2022
Mailing Address 5565 Glenridge Connector NE Ste 2000		FEC Identification Number C
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Fee		Amount of Each Disbursement this Period 89.46
Candidate Name		Transaction ID : 500848084
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Heppard, Scott, H, ,		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2022
Mailing Address 225 Loring Ct		FEC Identification Number C
City Sewell	State NJ	Zip Code 08080-3005
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 427.15
Candidate Name		Transaction ID : 500850694
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Capital One Bank		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2022
Mailing Address 336 Pennsylvania Ave SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-1147
Purpose of Disbursement Bank Fee		Amount of Each Disbursement this Period 25.00
Candidate Name		Transaction ID : 500849315
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	541.61
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 15	
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. FirstData		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2022
Mailing Address 5565 Glenridge Connector NE Ste 2000		FEC Identification Number C
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Merchant Fee		Amount of Each Disbursement this Period 138.16
Candidate Name		Transaction ID : 500848085
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Gusto		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2022
Mailing Address 525 20Th St		FEC Identification Number C
City San Francisco	State CA	Zip Code 94107-4345
Purpose of Disbursement Payroll Taxes		Amount of Each Disbursement this Period 222.20
Candidate Name		Transaction ID : 500849316
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. St. Patrick's Day Observance Association		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2022
Mailing Address PO Box 36629		FEC Identification Number C
City Philadelphia	State PA	Zip Code 19107-7629
Purpose of Disbursement Donation		Amount of Each Disbursement this Period 350.00
Candidate Name		Transaction ID : 500848086
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	710.36
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 15	
	<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)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Heppard, Scott, H, ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2022	
Mailing Address 225 Loring Ct			FEC Identification Number C	
City Sewell	State NJ	Zip Code 08080-3005	Amount of Each Disbursement this Period 852.59	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : 500849317	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Gusto			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2022	
Mailing Address 525 20Th St			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94107-4345	Amount of Each Disbursement this Period 111.10	
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : 500848078	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Gusto			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2022	
Mailing Address 525 20Th St			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94107-4345	Amount of Each Disbursement this Period 48.60	
Purpose of Disbursement Payroll Fee		Category/ Type	Transaction ID : 500848079	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1012.29
TOTAL This Period (last page this line number only).....▶	35400.54

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 15	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Boyle

Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2022	
Mailing Address 430 S Capitol St SE			FEC Identification Number C C00000935	
City Washington	State DC	Zip Code 20003-4024	Amount of Each Disbursement this Period 15000.00	
Purpose of Disbursement Unlimited Transfer to Federal Party Committee		Category/ Type	Transaction ID : 500855146	
Candidate Name		<input type="checkbox"/> Memo Item		
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.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item	
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			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item	
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).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	15000.00