

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
Mike Kelly For Congress

ADDRESS (number and street) PO Box 476
 Check if different than previously reported. (ACC) Lyndora PA 16045

2. **FEC IDENTIFICATION NUMBER** C C00474189 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
PA 06

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 01 / 01 / 2015 through M M / D D / Y Y Y Y 03 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Ann Coleman
Signature of Treasurer Ann Coleman *[Electronically Filed]* Date M M / D D / Y Y Y Y 04 / 15 / 2015

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Mike Kelly 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
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	157088.24	187598.19
(b) Total Contribution Refunds (from Line 20(d)) .....	.00	.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	157088.24	187598.19
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	97354.79	97354.79
(b) Total Offsets to Operating Expenditures (from Line 14).....	1218.92	1218.92
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	96135.87	96135.87
8. Cash on Hand at Close of Reporting Period (from Line 27).....	199344.58	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	277995.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Mike Kelly 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

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).....	78300.00	91550.00
(ii) Unitemized.....	5120.00	5390.00
(iii) TOTAL of contributions from individuals ▶	83420.00	96940.00
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	73668.24	90658.19
(d) The Candidate.....	.00	.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	157088.24	187598.19
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	.00	.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	.00	.00
(b) All Other Loans.....	.00	.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	.00	.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	1218.92	1218.92
15. OTHER RECEIPTS (Dividends, Interest, etc.)	1.34	1.34
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	158308.50	188818.45

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	97354.79	97354.79
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	.00	.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.00	.00
(b) Of All Other Loans .....	.00	.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.00	.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	.00	.00
21. OTHER DISBURSEMENTS .....	.00	.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	97354.79	97354.79

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	138390.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	158308.50
25. SUBTOTAL (add Line 23 and Line 24).....	296699.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	97354.79
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	199344.58

**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 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Dillon McCandless King Coulter & Graham LLP

Mailing Address 128 W. Cunningham Street

City State Zip Code
Butler PA 16001

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

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 / 26 / 2015

Transaction ID : SA11Ai-CN2130

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Eckert Seamans Cherin & Mellott LLC

Mailing Address 600 Grant Street 44th floor

City State Zip Code
Pittsburgh PA 15219

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

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 / 14 / 2015

Transaction ID : SA11Ai-CN2076

Amount of Each Receipt this Period
500

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

Mailing Address 73 Lebanon Hills Dr

City State Zip Code
Pittsburgh PA 15228

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

Name of Employer Occupation
Triangle Tech CEO

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
03 / 18 / 2015

Transaction ID : SA11Ai-CN2030

Amount of Each Receipt this Period
2700

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

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

3700.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Alan Balla

Mailing Address 1119 Bayhill Dr

City State Zip Code
Gibsonia PA 15044

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

Name of Employer Occupation
MBA Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500

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

Transaction ID : SA11Ai-CN2040

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Judith J Barkley

Mailing Address 207 Blackthorn Dr

City State Zip Code
Butler PA 16002

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500

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

Transaction ID : SA11Ai-CN2018

Amount of Each Receipt this Period
500

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

Mailing Address 2 Trillium Cir

City State Zip Code
Butler PA 16002

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

Name of Employer Occupation
Hefren Tillotson Investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 12 / 2015

Transaction ID : SA11Ai-CN2054

Amount of Each Receipt this Period
250

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

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

1250.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Frederick Y Bennitt

Mailing Address 3051 Edelweiss Ct

City Mars State PA Zip Code 16046

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

Name of Employer Retired Occupation Retired

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 / 26 / 2015

Transaction ID : SA11Ai-CN2102

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Kevin J Berry

Mailing Address 380 Three Degree Rd

City Renfrew State PA Zip Code 16053

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

Name of Employer Civil Air Patrol Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 12 / 2015

Transaction ID : SA11Ai-CN2042

Amount of Each Receipt this Period
300

C. Full Name (Last, First, Middle Initial)
Delia Bouwers Bianchin

Mailing Address 335 Belmont Rd

City Butler State PA Zip Code 16001

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

Name of Employer Penn United Occupation Attorney

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 / 07 / 2015

Transaction ID : SA11Ai-CN2070

Amount of Each Receipt this Period
500

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

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

1050.00

**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 91
	<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)
Mike Kelly For Congress

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

Mailing Address 1721 N Cliff St

City: Alexandria State: VA Zip Code: 22301

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

Name of Employer: Venn Strategies LLC Occupation: Government Relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 03 / 27 / 2015

Transaction ID : SA11Ai-CN2097

Amount of Each Receipt this Period: 500

B. Full Name (Last, First, Middle Initial)
Barton Bonn

Mailing Address 1403 Farnam Street Suite 306

City: Omaha State: NE Zip Code: 68102

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

Name of Employer: Self-employed Occupation: Merchant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 03 / 14 / 2015

Transaction ID : SA11Ai-CN2089

Amount of Each Receipt this Period: 500

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

Mailing Address 3299 NW K St Apt 401

City: Washington State: DC Zip Code: 20007

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

Name of Employer: Brody Group Occupation: Lobbyist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 03 / 14 / 2015

Transaction ID : SA11Ai-CN2094

Amount of Each Receipt this Period: 500

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 9 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Kenneth L Bronder

Mailing Address 103 Braethorn Dr

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Bronder Technical Services CEO

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 / 23 / 2015

Transaction ID : SA11Ai-CN2028

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Kenneth L Bronder

Mailing Address 103 Braethorn Dr

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Bronder Technical Services CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
650

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 12 / 2015

Transaction ID : SA11Ai-CN2055

Amount of Each Receipt this Period
150

C. Full Name (Last, First, Middle Initial)
Kenneth L Bronder

Mailing Address 103 Braethorn Dr

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Bronder Technical Services CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1100

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 12 / 2015

Transaction ID : SA11Ai-CN2056

Amount of Each Receipt this Period
450

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

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

1100.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Robert J Bruce

Mailing Address 510 Shenango Stop Rd

City State Zip Code
New Castle PA 16101

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

Name of Employer Occupation
Management Bruce & Merrilees Electric

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2015

Transaction ID : SA11Ai-CN2058

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Frank C Byham

Mailing Address 10860 Springs Rd

City State Zip Code
Meadville PA 16335

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

Name of Employer Occupation
Byham Ins. Serv. Retired

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 / 17 / 2015

Transaction ID : SA11Ai-CN2031

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Frank Calandra Jr

Mailing Address 258 Kappa Dr

City State Zip Code
Pittsburgh PA 15238

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

Name of Employer Occupation
Jennmar President

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 / 23 / 2015

Transaction ID : SA11Ai-CN2010

Amount of Each Receipt this Period
500

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

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

4100.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
William Cerami

Mailing Address 111 Richelieu Drive

City Cary State NC Zip Code 27518

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

Name of Employer Lord Corporation Occupation Executive

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 / 28 / 2015

Transaction ID : SA11Ai-CN2039

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Vincent Deluzio

Mailing Address 100 Kenyon Rd

City Pittsburgh State PA Zip Code 15205

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

Name of Employer Principal Occupation R & V Associates

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
03 / 14 / 2015

Transaction ID : SA11Ai-CN2078

Amount of Each Receipt this Period
2700

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

Mailing Address 104 Woodridge Rd

City Butler State PA Zip Code 16001

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

Name of Employer Butler Health System Occupation Physician

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 / 16 / 2015

Transaction ID : SA11Ai-CN1970

Amount of Each Receipt this Period
500

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

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

3700.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Michael Drewnowski

Mailing Address 109 Congress Hill Rd

City State Zip Code
Franklin PA 16323

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

Name of Employer Occupation
Retired Retired

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
 02 / 07 / 2015

Transaction ID : SA11Ai-CN1965

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Gerald Eighmy

Mailing Address 1266 Lake Rd

City State Zip Code
Conneaut OH 44030

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

Name of Employer Occupation
Amer. Turned Prod. 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
 01 / 27 / 2015

Transaction ID : SA11Ai-CN1949

Amount of Each Receipt this Period
500

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

Mailing Address 169 North Drive

City State Zip Code
Pittsburgh PA 15238

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

Name of Employer Occupation
PNC Bank Banker

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 / 14 / 2015

Transaction ID : SA11Ai-CN2077

Amount of Each Receipt this Period
250

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 13 OF 91
	<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)
Mike Kelly For Congress

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

Mailing Address 250 Logan Rd

City Valencia State PA Zip Code 16059

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

Name of Employer Retired Occupation Retired

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 / 23 / 2015

Transaction ID : SA11Ai-CN1992

Amount of Each Receipt this Period
500

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

Mailing Address 537 N Neville St
Apt 2b

City Pittsburgh State PA Zip Code 15213

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

Name of Employer Executive Occupation Federated Investors

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

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

Transaction ID : SA11Ai-CN2011

Amount of Each Receipt this Period
1000

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

Mailing Address 537 N Neville St
Apt 2b

City Pittsburgh State PA Zip Code 15213

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

Name of Employer Executive Occupation Federated Investors

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
 03 / 23 / 2015

Transaction ID : SA11Ai-CN2151

Amount of Each Receipt this Period
-800
 Redesignated to General 2016

[MEMO ITEM]
 Redesignated

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 14 OF 91
	<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)
Mike Kelly For Congress

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

Mailing Address 537 N Neville St
Apt 2b

City Pittsburgh State PA Zip Code 15213

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

Name of Employer Executive Occupation Federated Investors

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2015

Transaction ID : SA11Ai-CN2152

Amount of Each Receipt this Period
 800

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

B. Full Name (Last, First, Middle Initial)
Charles L Fuellgraf III

Mailing Address 166 Mckay Rd

City Saxonburg State PA Zip Code 16056

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

Name of Employer Fuellgraf Electric Co. Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2015

Transaction ID : SA11Ai-CN2044

Amount of Each Receipt this Period
 300

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

Mailing Address 10240 Grubbs Road

City Wexford State PA Zip Code 15090

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

Name of Employer Eckert Seamans 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
 03 / 14 / 2015

Transaction ID : SA11Ai-CN2081

Amount of Each Receipt this Period
 1000

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

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

1300.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Catherine J Glasgow

Mailing Address 133 Blazing Star Dr

City State Zip Code
Butler PA 16002

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

Name of Employer Occupation
Butler County Motor Co. Car Dealer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 07 / 2015

Transaction ID : SA11Ai-CN2073

Amount of Each Receipt this Period
300

B. Full Name (Last, First, Middle Initial)
Ruth Grant

Mailing Address 7886 Saltsburg Road

City State Zip Code
Pittsburgh PA 15239

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

Name of Employer Occupation
Homemaker Homemaker

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
03 / 14 / 2015

Transaction ID : SA11Ai-CN2079

Amount of Each Receipt this Period
2700

C. Full Name (Last, First, Middle Initial)
Stephen Ross Green

Mailing Address 207 Greenbriar Dr

City State Zip Code
Cranberry Township PA 16066

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
500

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

Transaction ID : SA11Ai-CN2012

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 16 OF 91
	<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)
Mike Kelly For Congress

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

Mailing Address 126 Bay Mist Dr

City Erie State PA Zip Code 16505

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

Name of Employer Greenville Corp Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

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

Transaction ID : SA11Ai-CN2036

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Nancy L Greenleaf

Mailing Address 126 Bay Mist Dr

City Erie State PA Zip Code 16505

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

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

Transaction ID : SA11Ai-CN2037

Amount of Each Receipt this Period
2600

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

Mailing Address 9595 Sky View Ln

City Conneaut Lake State PA Zip Code 16316

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

Name of Employer Teck Tool & Molded Plastics Occupation Owner

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 / 28 / 2015

Transaction ID : SA11Ai-CN2038

Amount of Each Receipt this Period
500

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

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

5700.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
George H Hancher

Mailing Address 415 Scott Ridge Rd

City: Harmony State: PA Zip Code: 16037

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

Name of Employer: Self-employed Occupation: Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 02 / 16 / 2015

Transaction ID : SA11Ai-CN1971

Amount of Each Receipt this Period: 500

B. Full Name (Last, First, Middle Initial)
Ralph E Hardt

Mailing Address 164 Forsythe Rd

City: Valencia State: PA Zip Code: 16059

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

Name of Employer: Jagemann Stamping Company Occupation: Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 02 / 23 / 2015

Transaction ID : SA11Ai-CN2024

Amount of Each Receipt this Period: 500

C. Full Name (Last, First, Middle Initial)
Robert R Heaton

Mailing Address 808 Tudor Dr

City: Butler State: PA Zip Code: 16001

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 02 / 23 / 2015

Transaction ID : SA11Ai-CN2013

Amount of Each Receipt this Period: 500

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 18 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Steven Irizarry

Mailing Address 1455 Pennsylvania Avenue NW Suite

City Washington State DC Zip Code 20004

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

Name of Employer Roberti & White LLC 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
03 / 20 / 2015

Transaction ID : SA11Ai-CN2132

Amount of Each Receipt this Period
1000

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

Mailing Address 5725 Rex Norroy Dr

City Gibsonia State PA Zip Code 15044

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : SA11Ai-CN2025

Amount of Each Receipt this Period
500

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

Mailing Address 5725 Rex Norroy Dr

City Gibsonia State PA Zip Code 15044

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 26 / 2015

Transaction ID : SA11Ai-CN2112

Amount of Each Receipt this Period
2200

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

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

3700.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Victoria Jackson

Mailing Address 5725 Rex Norroy Dr

City State Zip Code
Gibsonia PA 15044

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3100

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2015

Transaction ID : SA11Ai-CN2113

Amount of Each Receipt this Period
400

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

Mailing Address 256 Keasey Rd

City State Zip Code
Cabot PA 16023

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

Name of Employer Occupation
Penn United 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 / 23 / 2015

Transaction ID : SA11Ai-CN2015

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Susan M Kelly

Mailing Address 4519 Antoinette Ct

City State Zip Code
Erie PA 16506

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

Name of Employer Occupation
Homemaker Homemaker

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 / 16 / 2015

Transaction ID : SA11Ai-CN1972

Amount of Each Receipt this Period
500

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

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

1400.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Jeffrey Kimbell

Mailing Address 601 13th Street NW Suite 650 N

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

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

Name of Employer Jeffrey J. Kimbell & Associates	Occupation Small Business Owner
---	------------------------------------

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 / 10 / 2015

Transaction ID : SA11Ai-CN1987

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Sally Kohler

Mailing Address 341 Shenley Dr

City Erie	State PA	Zip Code 16505
--------------	-------------	-------------------

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

Name of Employer Educator/Guidance Counselor	Occupation Retired
---	-----------------------

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 / 07 / 2015

Transaction ID : SA11Ai-CN1964

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
D Scott Kroh

Mailing Address 809 Weldon St

City Latrobe	State PA	Zip Code 15650
-----------------	-------------	-------------------

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

Name of Employer Robindale Energy	Occupation CEO
--------------------------------------	-------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2015

Transaction ID : SA11Ai-CN2110

Amount of Each Receipt this Period
2600

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
David L Lloyd

Mailing Address 101 Fairlane Dr

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Semi-retired Self-employed

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 23 2015

Transaction ID : SA11Ai-CN1991

Amount of Each Receipt this Period
500

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

Mailing Address 5216 Wolf Run Dr

City State Zip Code
Erie PA 16505

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

Name of Employer Occupation
Printing Concepts 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
01 27 2015

Transaction ID : SA11Ai-CN1950

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Jennifer Jo McCarren

Mailing Address 7214 Ridge Rd

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Contractor Self

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 07 2015

Transaction ID : SA11Ai-CN2059

Amount of Each Receipt this Period
250

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

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

1250.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
William L McCarrier

Mailing Address 175 Evans Rd

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Butler Co. Commisioner Retired

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 / 23 / 2015

Transaction ID : SA11Ai-CN2026

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mark McClymonds

Mailing Address PO Box 296

City State Zip Code
Portersville PA 16051

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

Name of Employer Occupation
McClymonds Supply Businessman

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 / 23 / 2015

Transaction ID : SA11Ai-CN1993

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
David L McKivigan

Mailing Address 8 Pittsburgh Rd

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Butler Tire Distrib. Tire Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2015

Transaction ID : SA11Ai-CN2071

Amount of Each Receipt this Period
300

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

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

1300.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Daniel Meyer

Mailing Address 2506 Duxbury Pl

City State Zip Code
Alexandria VA 22308

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

Name of Employer Occupation
The Duberstein Group Inc 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
03 / 31 / 2015

Transaction ID : SA11Ai-CN2099

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Anne A Miller

Mailing Address 143 September Dr

City State Zip Code
Butler PA 16002

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

Name of Employer Occupation
Homemaker Homemaker

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 / 23 / 2015

Transaction ID : SA11Ai-CN2019

Amount of Each Receipt this Period
500

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

Mailing Address 16760 Winchester Club Drive

City State Zip Code
Meadow Vista CA 95722

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

Name of Employer Occupation
Self-employed Business Owner

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 / 31 / 2015

Transaction ID : SA11Ai-CN2137

Amount of Each Receipt this Period
250

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 91
	<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)
Mike Kelly For Congress

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

Mailing Address 409 G Street SE

City Washington State DC Zip Code 20003

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

Name of Employer MCapitol Management Occupation Senior VP

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 / 14 / 2015

Transaction ID : SA11Ai-CN2090

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Cesar S Miranda Jr

Mailing Address 585 2nd Street

City Butler State PA Zip Code 16001

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

Name of Employer Physician Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2015

Transaction ID : SA11Ai-CN2104

Amount of Each Receipt this Period
300

C. Full Name (Last, First, Middle Initial)
Ronald H Muhlenkamp

Mailing Address 725 Three Degree Rd

City Butler State PA Zip Code 16002

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

Name of Employer President Occupation Muhlenkamp & Co Inc.

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 / 07 / 2015

Transaction ID : SA11Ai-CN2072

Amount of Each Receipt this Period
500

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

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

1800.00

**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 91
	<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)
Mike Kelly For Congress

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

Mailing Address 1 Park Edge Dr

City State Zip Code
Zelienople PA 16063

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

Name of Employer Occupation
Self-employed Real Estate

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 / 23 / 2015

Transaction ID : SA11Ai-CN1994

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Nancy J Mycka

Mailing Address 528 Sheldon Rd

City State Zip Code
Valencia PA 16059

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

Name of Employer Occupation
Hunter Truck Sales Executive

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 / 12 / 2015

Transaction ID : SA11Ai-CN2043

Amount of Each Receipt this Period
500

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

Mailing Address 3910 E 91st Ave

City State Zip Code
Parrish FL 34219

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

Name of Employer Occupation
LECOM Attorney

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 / 07 / 2015

Transaction ID : SA11Ai-CN1968

Amount of Each Receipt this Period
500

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 26 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
John O'Neill

Mailing Address 1749 Seaton Street NW

City Washington State DC Zip Code 20009

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

Name of Employer Capitol Counsel Occupation Attorney

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 : SA11Ai-CN1986

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Gail A Paserba

Mailing Address 121 Mountain Laurel Dr

City Butler State PA Zip Code 16002

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

Name of Employer IQC Inc. Occupation Owner

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 / 23 / 2015

Transaction ID : SA11Ai-CN2027

Amount of Each Receipt this Period
500

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

Mailing Address 125 Autumn Dr

City Butler State PA Zip Code 16001

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

Name of Employer Sophisticated Alloys Inc. Occupation Executive

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 / 23 / 2015

Transaction ID : SA11Ai-CN2020

Amount of Each Receipt this Period
500

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 27 OF 91
	<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)
Mike Kelly For Congress

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

Mailing Address 30 Isabella Street Suite 300

City Pittsburgh State PA Zip Code 15212

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

Name of Employer Allegheny Health Network Occupation CEO

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
 03 / 27 / 2015

Transaction ID : SA11Ai-CN2098

Amount of Each Receipt this Period
2700

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

Mailing Address 5437 Cherry St

City Erie State PA Zip Code 16509

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

Name of Employer Ridg-U-Rak Occupation Civil and Structural Eng./Pres. & CEO

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
 01 / 27 / 2015

Transaction ID : SA11Ai-CN1948

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Louis J Porreco

Mailing Address 232 Niagara Point Dr

City Erie State PA Zip Code 16507

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

Name of Employer Bianchi Honda Occupation Auto Dealer

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
 01 / 27 / 2015

Transaction ID : SA11Ai-CN1946

Amount of Each Receipt this Period
500

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

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

3700.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Robert M Power Jr

Mailing Address 346 Edgewood Dr

City State Zip Code
Meadville PA 16335

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

Name of Employer Occupation
McGill Power Bell & Assoc. CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2015

Transaction ID : SA11Ai-CN2051

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Joseph Reschini

Mailing Address 922 Philadelphia Street

City State Zip Code
Indiana PA 15701

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

Name of Employer Occupation
The Reschini Group Executive

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
 03 / 14 / 2015

Transaction ID : SA11Ai-CN2080

Amount of Each Receipt this Period
2700

C. Full Name (Last, First, Middle Initial)
Gary Robins

Mailing Address 1164 Avonlea Circle

City State Zip Code
Glen Mills PA 19342

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

Name of Employer Occupation
Self-employed Franchisee

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 / 31 / 2015

Transaction ID : SA11Ai-CN2136

Amount of Each Receipt this Period
250

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

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

5550.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Anthony Roda

Mailing Address 3416 Old Dominion Blvd

City State Zip Code
Alexandria VA 22305

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

Name of Employer Occupation
Williams & Jensen PLLC Attorney

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 / 18 / 2015

Transaction ID : SA11Ai-CN2029

Amount of Each Receipt this Period
250

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

Mailing Address 1413 Oak St

City State Zip Code
Oakmont PA 15139

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

Name of Employer Occupation
McCrorry & McDowell Principal

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 / 16 / 2015

Transaction ID : SA11Ai-CN1973

Amount of Each Receipt this Period
1000

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

Mailing Address 20436 Route 19 Suite 620
Box 144

City State Zip Code
Cranberry Township PA 16066

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

Name of Employer Occupation
Westinghouse Manager

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 / 23 / 2015

Transaction ID : SA11Ai-CN2021

Amount of Each Receipt this Period
500

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Donald B Rodgers

Mailing Address 215 Executive Dr
Apt 300

City Cranberry Township State PA Zip Code 16066

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

Name of Employer Creative Real Estate Development Co. Occupation Developer

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 / 12 / 2015

Transaction ID : SA11Ai-CN2045

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
James Rohr

Mailing Address 613 Dorseyville Rd

City Pittsburgh State PA Zip Code 15238

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

Name of Employer Chairman & CEO Occupation PNC Financial Services Group

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
03 / 14 / 2015

Transaction ID : SA11Ai-CN2082

Amount of Each Receipt this Period
2700

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

Mailing Address 826 Country Club Dr

City Pittsburgh State PA Zip Code 15228

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

Name of Employer Owner Occupation Rohrich Auto Group

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 / 14 / 2015

Transaction ID : SA11Ai-CN2084

Amount of Each Receipt this Period
1000

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 31 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Ellen S Romett

Mailing Address 114 Edgewood Rd

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

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2015

Transaction ID : SA11Ai-CN2047

Amount of Each Receipt this Period
450

B. Full Name (Last, First, Middle Initial)
Shawn Rooney

Mailing Address 5320 W 38th St

City Erie	State PA	Zip Code 16506
--------------	-------------	-------------------

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

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

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
 01 / 27 / 2015

Transaction ID : SA11Ai-CN1951

Amount of Each Receipt this Period
500

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

Mailing Address 7315 River Hammock Drive Unit 102

City Bradenton	State FL	Zip Code 34212
-------------------	-------------	-------------------

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

Name of Employer Consultant	Occupation Self-employed
--------------------------------	-----------------------------

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 / 23 / 2015

Transaction ID : SA11Ai-CN1998

Amount of Each Receipt this Period
500

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

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

1450.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Gary P Schneider

Mailing Address 13 Niagara Pier

City Erie State PA Zip Code 16507

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

Name of Employer Howard Industries Occupation CEO

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
01 / 27 / 2015

Transaction ID : SA11Ai-CN1947

Amount of Each Receipt this Period
500

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

Mailing Address 437 Grant Street Ste 617

City Pittsburgh State PA Zip Code 15219

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

Name of Employer Attorney Occupation Attorney

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 / 26 / 2015

Transaction ID : SA11Ai-CN2103

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Dr. Henry D Sinopoli

Mailing Address 411 W Jefferson St

City Butler State PA Zip Code 16001

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

Name of Employer Consultant Occupation Consultant

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 / 07 / 2015

Transaction ID : SA11Ai-CN2069

Amount of Each Receipt this Period
500

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 33 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Michael T Slupe

Mailing Address 131 Oak Hills Mnr

City State Zip Code
Butler PA 16002

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

Name of Employer Occupation
Butler County Sheriff

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 / 12 / 2015

Transaction ID : SA11Ai-CN2046

Amount of Each Receipt this Period
500

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

Mailing Address 745 Muirfield Dr.

City State Zip Code
Greensburg PA 15601

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

Name of Employer Occupation
Jennmar Vice 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 / 23 / 2015

Transaction ID : SA11Ai-CN2009

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
John M Stilley

Mailing Address 131 Blackthorn Dr

City State Zip Code
Butler PA 16002

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

Name of Employer Occupation
Amerikohl CEO

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
03 / 26 / 2015

Transaction ID : SA11Ai-CN2106

Amount of Each Receipt this Period
2700

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

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

3700.00

**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 91
	<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)
Mike Kelly For Congress

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

Mailing Address 131 Blackthorn Dr

City State Zip Code
Butler PA 16002

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

Name of Employer Occupation
Amerikohl CEO

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 / 26 / 2015

Transaction ID : SA11Ai-CN2107

Amount of Each Receipt this Period
2300

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

Mailing Address 1536 Colwell Street Unit 1

City State Zip Code
Pittsburgh PA 15219

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

Name of Employer Occupation
Preservation Technologies Executive

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 / 12 / 2015

Transaction ID : SA11Ai-CN2131

Amount of Each Receipt this Period
500

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

Mailing Address 132 Andrews Trce

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Homemaker Homemaker

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 / 23 / 2015

Transaction ID : SA11Ai-CN2016

Amount of Each Receipt this Period
500

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

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

3300.00

**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 91
	<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)
Mike Kelly For Congress

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

Mailing Address 13021 Flatts Rd

City Waterford State PA Zip Code 16441

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

Name of Employer Troyer Sand & Gravel Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 17 / 2015

Transaction ID : SA11Ai-CN1945

Amount of Each Receipt this Period
400

B. Full Name (Last, First, Middle Initial)
Beatrice M Turner

Mailing Address 110 Windhaven Ln

City Portersville State PA Zip Code 16051

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

Name of Employer Retired Occupation Retired

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 / 12 / 2015

Transaction ID : SA11Ai-CN2049

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Paul Vecchione

Mailing Address 6 Matthews Farm Road

City Belle Mead State NJ Zip Code 08502

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

Name of Employer Eisneramper Occupation Financial Advisor

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 / 05 / 2015

Transaction ID : SA11Ai-CN2002

Amount of Each Receipt this Period
1500
 piryx

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

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

2150.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Dale A Walker

Mailing Address 450 Laury Ln

City State Zip Code
New Wilmington PA 16142

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

Name of Employer Occupation
Retired Retired

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 : SA11Ai-CN2008

Amount of Each Receipt this Period
1000

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

Mailing Address 7042 Forrest Trl Rd

City State Zip Code
Butler PA 16002

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

Name of Employer Occupation
Walsh Equipment Executive

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 / 23 / 2015

Transaction ID : SA11Ai-CN2022

Amount of Each Receipt this Period
500

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

Mailing Address 128 Forest Mere Cir

City State Zip Code
Butler PA 16002

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

Name of Employer Occupation
Eagle Printery Printer

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 / 23 / 2015

Transaction ID : SA11Ai-CN2023

Amount of Each Receipt this Period
500

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Louise R Yates

Mailing Address 107 Park Crest Ln

City State Zip Code
Butler PA 16001

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300

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

Transaction ID : SA11Ai-CN2017

Amount of Each Receipt this Period
300

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).....

300.00

78300.00

**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 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
7-Eleven Franchisee's PAC

Mailing Address 3700 Wildshire Blvd.

City Los Angeles State CA Zip Code 90010

FEC ID number of contributing federal political committee. **C** C00549717

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 / 31 / 2015

Transaction ID : SA11C-CN2150

Amount of Each Receipt this Period
 500

B. Full Name (Last, First, Middle Initial)
Action Comm. for Rural Electrification PAC

Mailing Address 4301 Wilson Blvd

City Arlington State VA Zip Code 22203-1860

FEC ID number of contributing federal political committee. **C** C00002972

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 / 07 / 2015

Transaction ID : SA11C-CN2075

Amount of Each Receipt this Period
 2500

C. Full Name (Last, First, Middle Initial)
Allegheny Technologies Incorporated PAC

Mailing Address 1000 6 PPG Place

City Pittsburgh State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00141697

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 / 14 / 2015

Transaction ID : SA11C-CN2086

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 39 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Altria Group Inc. PAC

Mailing Address 101 Constitution Ave NW
Suite 400W

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2015

Transaction ID : SA11C-CN2066

Amount of Each Receipt this Period
 1500

B. Full Name (Last, First, Middle Initial)
American Occupational Therapy Assoc. Inc. PAC

Mailing Address 4720 Montgomery Ln

City Bethesda State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00089086

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 / 26 / 2015

Transaction ID : SA11C-CN2120

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
American Physical Therapy Assoc. Pac

Mailing Address 1111 N Fairfax St

City Alexandria State VA Zip Code 22314

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 1500

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

Transaction ID : SA11C-CN2144

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 40 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
American Society of Association Executives Pac

Mailing Address 1575 I Street NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00041566

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 / 07 / 2015

Transaction ID : SA11C-CN2060

Amount of Each Receipt this Period
 1000

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

Mailing Address 1001 Pennsylvania Ave NW Suite 71

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00197228

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 / 07 / 2015

Transaction ID : SA11C-CN2065

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
Arch PAC

Mailing Address Cityplace One

City St. Louis State MO Zip Code 63141

FEC ID number of contributing federal political committee. **C** C00167668

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 / 07 / 2015

Transaction ID : SA11C-CN2063

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 41 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Boeing Company PAC - BPAC

Mailing Address 929 Long Bridge Drive

City State Zip Code
Arlington VA 22202-4208

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
1000

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

Transaction ID : SA11C-CN2149

Amount of Each Receipt this Period
1000

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

Mailing Address 201 Chicago Ave

City State Zip Code
Minneapolis MN 55415

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
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2015

Transaction ID : SA11C-CN2091

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Burger King Franchisee PAC

Mailing Address 1701 NW Barrett Lakes Blvd
Ste 180

City State Zip Code
Kennesaw GA 30144

FEC ID number of contributing federal political committee. **C C00329425**

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 : SA11C-CN2135

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 42 OF 91
	<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)
Mike Kelly For Congress

A. Caremark RX Inc Employee's PAC

Full Name (Last, First, Middle Initial)
Caremark RX Inc Employee's PAC

Mailing Address 1300 NW I St
Suite 525 W

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00384818**

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 / 28 / 2015

Transaction ID : SA11C-CN2033

Amount of Each Receipt this Period
1000

B. Cigna PAC

Full Name (Last, First, Middle Initial)
Cigna PAC

Mailing Address 1601 Chestnut Street T116b

City Philadelphia State PA Zip Code 19192

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
1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 26 / 2015

Transaction ID : SA11C-CN2127

Amount of Each Receipt this Period
1000

C. Coalition Of Franchisee Associations PAC

Full Name (Last, First, Middle Initial)
Coalition Of Franchisee Associations PAC

Mailing Address 1201 Roberts Blvd Suite 100

City Kennesaw State GA Zip Code 30144

FEC ID number of contributing federal political committee. **C C00458042**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1218.24

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

Transaction ID : SA11C-CN2142

Amount of Each Receipt this Period
1218.24

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

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

3218.24

**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 91
	<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)
Mike Kelly For Congress

A. Coalition Of Franchisee Associations PAC

Full Name (Last, First, Middle Initial)
Coalition Of Franchisee Associations PAC

Mailing Address 1201 Roberts Blvd Suite 100

City Kennesaw State GA Zip Code 30144

FEC ID number of contributing federal political committee. **C** C00458042

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3918.24

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

Transaction ID : SA11C-CN2143

Amount of Each Receipt this Period
 2700

B. Commonwealth Altadis Employee PAC (CAE-PAC)

Full Name (Last, First, Middle Initial)
Commonwealth Altadis Employee PAC (CAE-PAC)

Mailing Address 5900 N Andrews Ave Suite 1100

City Fort Lauderdale State FL Zip Code 33309

FEC ID number of contributing federal political committee. **C** C00455600

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 : SA11C-CN2147

Amount of Each Receipt this Period
 1000

C. Consol Energy Inc. Pac

Full Name (Last, First, Middle Initial)
Consol Energy Inc. Pac

Mailing Address 1000 Consol Energy Dr

City Canonsburg State PA Zip Code 15317

FEC ID number of contributing federal political committee. **C** C00279331

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 / 26 / 2015

Transaction ID : SA11C-CN2124

Amount of Each Receipt this Period
 2500

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

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

6200.00

**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 91
	<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)
Mike Kelly For Congress

A. Council Of Insurance Agents & Brokers PAC -CPAC

Full Name (Last, First, Middle Initial)
Mailing Address 701 Pennsylvania Ave NW Suite 750

City Washington State DE Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00039578

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
 03 / 31 / 2015

Transaction ID : SA11C-CN2146

Amount of Each Receipt this Period
 2000

B. Education Management Corporation Employee PAC

Full Name (Last, First, Middle Initial)
Mailing Address 210 6th Ave
33rd Floor

City Pittsburgh State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00466169

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
 03 / 14 / 2015

Transaction ID : SA11C-CN2093

Amount of Each Receipt this Period
 1500

C. Eli Lilly & Company PAC

Full Name (Last, First, Middle Initial)
Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285

FEC ID number of contributing federal political committee. **C** C00082792

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
 03 / 14 / 2015

Transaction ID : SA11C-CN2092

Amount of Each Receipt this Period
 1500

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 45 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Express Scripts Inc Pac

Mailing Address 1 Express Way

City St Louis State MO Zip Code 63121

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
 02 / 23 / 2015

Transaction ID : SA11C-CN1990

Amount of Each Receipt this Period
 2500

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

Mailing Address c/o The Beechwood Co
1001 Liberty Ave

City Pittsburgh State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00336842

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 / 14 / 2015

Transaction ID : SA11C-CN2085

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
Holland & Knight Committee for Effective Government

Mailing Address 800 NW 17th St
Suite 1100

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00171330

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 / 26 / 2015

Transaction ID : SA11C-CN2115

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 46 OF 91
<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)
Mike Kelly 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

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
1500

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 07 / 2015

Transaction ID : SA11C-CN2061

Amount of Each Receipt this Period
1500

B. International Union of Operating Engineers Epec

Full Name (Last, First, Middle Initial)
Mailing Address 1125 17th NW

City Washington State DC Zip Code 20036

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
 03 / 26 / 2015

Transaction ID : SA11C-CN2117

Amount of Each Receipt this Period
5000

C. Investment Company Institute Pac

Full Name (Last, First, Middle Initial)
Mailing Address 1401 NW H St Apt 1200

City Washington State DC Zip Code 20005

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
1500

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 26 / 2015

Transaction ID : SA11C-CN2118

Amount of Each Receipt this Period
1500

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 47 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
ITC Holdings Corp. PAC

Mailing Address 201 Townsend Street Suite 900

City: Lansing State: MI Zip Code: 48933

FEC ID number of contributing federal political committee: **C C00388462**

Name of Employer: Occupation:

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 02 / 23 / 2015

Transaction ID : SA11C-CN1995

Amount of Each Receipt this Period: 1000

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

Mailing Address 1000 Lowe's Blvd

City: Mooresville State: NC Zip Code: 28117

FEC ID number of contributing federal political committee: **C C00251751**

Name of Employer: Occupation:

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000

Date of Receipt: 03 / 14 / 2015

Transaction ID : SA11C-CN2088

Amount of Each Receipt this Period: 2000

C. Full Name (Last, First, Middle Initial)
MBA PAC

Mailing Address 2171 W 38th St

City: Erie State: PA Zip Code: 16508

FEC ID number of contributing federal political committee: **C C00199463**

Name of Employer: Occupation:

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 02 / 23 / 2015

Transaction ID : SA11C-CN1997

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 48 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
NAASF Inc. SUBS PAC

Mailing Address 16760 Winchester Club Drive

City Meadow Vista State PA Zip Code 95722

FEC ID number of contributing federal political committee. **C** C00492512

Name of Employer Occupation

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 / 31 / 2015

Transaction ID : SA11C-CN2138

Amount of Each Receipt this Period
 250

B. Full Name (Last, First, Middle Initial)
National Assoc. Of Ind. Life Brokerage Agencies PAC

Mailing Address 228 S. Washington Street Suite 11

City Alexandria State VA Zip Code 22314

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 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2015

Transaction ID : SA11C-CN2062

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
National Association of Enrolled Agents Pac

Mailing Address 1120 Connecticut Ave NW Suite 460

City Washington State DC Zip Code 20036

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
 03 / 14 / 2015

Transaction ID : SA11C-CN2095

Amount of Each Receipt this Period
 1000

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: PAGE 49 OF 91
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
National Association Of Insurance And Financial Advisors PAC

Mailing Address 2901n Telestar Ct

City Falls Church State VA Zip Code 22042

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 1000

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

Transaction ID : SA11C-CN1996

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
National Association of Real Estate Investment Trusts Inc Pac

Mailing Address 1875 I Street NW Suite 600

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00303339

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 / 12 / 2015

Transaction ID : SA11C-CN2052

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
National Association of Real Estate Investment Trusts Inc Pac

Mailing Address 1875 I Street NW Suite 600

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00303339

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 / 12 / 2015

Transaction ID : SA11C-CN2053

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 50 OF 91
	<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)
Mike Kelly For Congress

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

Mailing Address PO Box 619911

City State Zip Code
Dallas TX 75261

FEC ID number of contributing federal political committee. **C** C00140061

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 : SA11C-CN2148

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
New York Life Insurance PAC

Mailing Address 51 Madison Avenue Room 1109

City State Zip Code
New York NY 10010

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
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2015

Transaction ID : SA11C-CN2129

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
NMHC PAC

Mailing Address 1850 NW M St
Suite 540

City State Zip Code
Washington DC 20036

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
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2015

Transaction ID : SA11C-CN2087

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 51 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
PATH PAC - College Of American Pathologists PAC

Mailing Address 1350 I Street NW Suite 590

City	State	Zip Code
Washington	DC	20005

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
 02 / 28 / 2015

Transaction ID : SA11C-CN2032

Amount of Each Receipt this Period
 _____ 1000

B. Full Name (Last, First, Middle Initial)
Petroleum Marketers Assoc Of America PAC

Mailing Address 1901 N. Fort Myer Drive Suite 500

City	State	Zip Code
Arlington	VA	22209

FEC ID number of contributing federal political committee. **C** C00035204

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 / 26 / 2015

Transaction ID : SA11C-CN2121

Amount of Each Receipt this Period
 _____ 2500

C. Full Name (Last, First, Middle Initial)
Petroleum Marketers Assoc Of America PAC

Mailing Address 1901 N. Fort Myer Drive Suite 500

City	State	Zip Code
Arlington	VA	22209

FEC ID number of contributing federal political committee. **C** C00035204

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 / 26 / 2015

Transaction ID : SA11C-CN2122

Amount of Each Receipt this Period
 _____ 2500

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 52 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Pharmaceutical Care Mgmt Assoc (PCMA) PAC

Mailing Address 601 Pennsylvania Avenue NW
ste 740

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00388819**

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 / 26 / 2015

Transaction ID : SA11C-CN2125

Amount of Each Receipt this Period
1000

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

Mailing Address 700 W 47th St
Suite 1000

City Kansas City State MO Zip Code 64112

FEC ID number of contributing federal political committee. **C C00445981**

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 / 14 / 2015

Transaction ID : SA11C-CN2096

Amount of Each Receipt this Period
1500

C. Full Name (Last, First, Middle Initial)
PriceWaterhouseCoopers PAC

Mailing Address 600 13th Street NW
Suite 1000

City Washington State DC Zip Code 20005

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 **1500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 16 / 2015

Transaction ID : SA11C-CN1969

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 53 OF 91
	<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)
Mike Kelly For Congress

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

Mailing Address 600 13th Street NW
Suite 1000

City Washington State DC Zip Code 20005

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
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2015

Transaction ID : SA11C-CN2119

Amount of Each Receipt this Period
1000

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

Mailing Address 1090 Horsham Rd
PO Box 1090

City North Whales State PA Zip Code 19454

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
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2015

Transaction ID : SA11C-CN2123

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Thrivent Financial for Lutherans PAC

Mailing Address PO Box 1892

City Appleton State WI Zip Code 54912

FEC ID number of contributing federal political committee. **C** C00121319

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 / 26 / 2015

Transaction ID : SA11C-CN2116

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 54 OF 91
	<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)
Mike Kelly For Congress

A. Full Name (Last, First, Middle Initial)
Transamerica Corp PAC

Mailing Address 600 13th NW Suite 400B

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00122614

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 / 26 / 2015

Transaction ID : SA11C-CN2128

Amount of Each Receipt this Period
 1500

B. Full Name (Last, First, Middle Initial)
United Technologies Employee PAC

Mailing Address 1101 Pennsylvania Avenue NW 10th

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00035683

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 / 07 / 2015

Transaction ID : SA11C-CN2064

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
UPS PAC

Mailing Address 55 NE Glenlake Pkwy

City Atlanta State GA Zip Code 30328

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

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 / 16 / 2015

Transaction ID : SA11C-CN1981

Amount of Each Receipt this Period
 2500

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 55 OF 91
	<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)
Mike Kelly For Congress

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

Mailing Address 801 Pennsylvania Ave NW
Suite 200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00109546

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2015

Transaction ID : SA11C-CN2126

Amount of Each Receipt this Period
 2500

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 M / D 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 M / D 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).....

2500.00

73668.24

**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 56 OF 91
	<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)
Mike Kelly For Congress

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

Mailing Address 425 7th Street NW

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **618.92**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 17 / 2015

Transaction ID : SA14-ER2

Amount of Each Receipt this Period
618.92

Expenditure Refund

B. Full Name (Last, First, Middle Initial)
Estate Of Orlando S. Pride III

Mailing Address 220 S. Main Street Suite 8

City Butler State PA Zip Code 16001

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 16 / 2015

Transaction ID : SA14-ER1

Amount of Each Receipt this Period
600

Expenditure Refund

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).....

1218.92

1218.92

**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 91	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Trail Blazer Campaign Services Inc.		Date of Disbursement MM / DD / YYYY 01 / 01 / 2015
Mailing Address 620 Mendelssohn Avenue N Suite 186		Amount of Each Disbursement this Period 6500.00
City Golden Valley State MN Zip Code 55427	Purpose of Disbursement 2015 Licensing fees	Transaction ID : SB17-EX1
Candidate Name	Category/Type 001	2015 Licensing fees
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. Ann Coleman		Date of Disbursement MM / DD / YYYY 01 / 01 / 2015
Mailing Address 6758 St. Regis Blvd.		Amount of Each Disbursement this Period 2221.20
City Hudson State OH Zip Code 44236	Purpose of Disbursement January consulting \$2000; Dec mileage \$221.20	Transaction ID : SB17-EX9
Candidate Name	Category/Type 001	January consulting \$2000; Dec mileage \$221.20
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) c. Ann Coleman		Date of Disbursement MM / DD / YYYY 01 / 02 / 2015
Mailing Address 6758 St. Regis Blvd.		Amount of Each Disbursement this Period 4946.50
City Hudson State OH Zip Code 44236	Purpose of Disbursement Coleman 4Q commission	Transaction ID : SB17-EX5
Candidate Name	Category/Type 001	Coleman 4Q commission
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	13667.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 91			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Ann Coleman			Date of Disbursement MM / DD / YYYY 02 / 01 / 2015
Mailing Address 6758 St. Regis Blvd.			Amount of Each Disbursement this Period 2000.00
City Hudson	State OH	Zip Code 44236	Transaction ID : SB17-EX26
Purpose of Disbursement February consulting		Category/ Type 001	
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	February consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Ann Coleman			Date of Disbursement MM / DD / YYYY 03 / 01 / 2015
Mailing Address 6758 St. Regis Blvd.			Amount of Each Disbursement this Period 2000.00
City Hudson	State OH	Zip Code 44236	Transaction ID : SB17-EX153
Purpose of Disbursement March consulting		Category/ Type 001	
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	March consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) c. Ann Coleman			Date of Disbursement MM / DD / YYYY 03 / 01 / 2015
Mailing Address 6758 St. Regis Blvd.			Amount of Each Disbursement this Period 368.58
City Hudson	State OH	Zip Code 44236	Transaction ID : SB17-EX154
Purpose of Disbursement Mileage reimbursement		Category/ Type 002	
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Mileage reimbursement
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4368.58
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 91	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. George J. Howe Candy			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2015	
Mailing Address 629 West Main Street			Amount of Each Disbursement this Period 298.80	
City Grove City	State PA	Zip Code 16127	Transaction ID : SB17-EX178	
Purpose of Disbursement Parade candy		Category/ Type 001	Parade candy	
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. Acme Fresh Market			Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015	
Mailing Address 116 West Streetsboro Street			Amount of Each Disbursement this Period 392.00	
City Hudson	State OH	Zip Code 44236	Transaction ID : SB17-EX60	
Purpose of Disbursement Postage for fundraising letters		Category/ Type 001	Postage for fundraising letters	
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) C. Acme Fresh Market			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2015	
Mailing Address 116 West Streetsboro Street			Amount of Each Disbursement this Period 147.00	
City Hudson	State OH	Zip Code 44236	Transaction ID : SB17-EX100	
Purpose of Disbursement Postage		Category/ Type 001	Postage	
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:				

SUBTOTAL of Disbursements This Page (optional).....	837.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 91			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Acme Fresh Market		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2015
Mailing Address 116 West Streetsboro Street		Amount of Each Disbursement this Period 135.74
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Beverages for 3/12 fundraiser	Category/Type 001	Transaction ID : SB17-EX79
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)	Beverages for 3/12 fundraiser
State: District:		

Full Name (Last, First, Middle Initial) B. Acme Fresh Market		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2015
Mailing Address 116 West Streetsboro Street		Amount of Each Disbursement this Period 98.00
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Postage for general mail	Category/Type 001	Transaction ID : SB17-EX80
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)	Postage for general mail
State: District:		

Full Name (Last, First, Middle Initial) C. Acme Fresh Market		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015
Mailing Address 116 West Streetsboro Street		Amount of Each Disbursement this Period 135.74
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Wine for 3/12 event	Category/Type 007	Transaction ID : SB17-EX179
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)	Wine for 3/12 event
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	369.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Acme Fresh Market		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015
Mailing Address 116 West Streetsboro Street		Amount of Each Disbursement this Period 98.00
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Postage	Category/Type 001	Transaction ID : SB17-EX180
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)	Postage
State: District:		

Full Name (Last, First, Middle Initial) B. Michael's On East		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2015
Mailing Address 1212 S. East Avenue		Amount of Each Disbursement this Period 1147.57
City Sarasota	State FL Zip Code 34239	
Purpose of Disbursement Catering expenses for 2/20/2015 event	Category/Type 007	Transaction ID : SB17-EX116
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)	Catering expenses for 2/20/2015 event
State: District:		

Full Name (Last, First, Middle Initial) c. Michael's On East		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2015
Mailing Address 1212 S. East Avenue		Amount of Each Disbursement this Period 200.00
City Sarasota	State FL Zip Code 34239	
Purpose of Disbursement Catering fees	Category/Type 007	Transaction ID : SB17-EX124
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)	Catering fees
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1445.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 91	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Mercer County Republican Party		Date of Disbursement MM / DD / YYYY 01 / 23 / 2015
Mailing Address 124 South Diamond Street		Amount of Each Disbursement this Period 550.00
City Mercer	State PA Zip Code 16137	
Purpose of Disbursement Lincoln Day Dinner Tickets		Transaction ID : SB17-EX29
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)	Lincoln Day Dinner Tickets
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Mercer County Republican Party		Date of Disbursement MM / DD / YYYY 03 / 18 / 2015
Mailing Address 124 South Diamond Street		Amount of Each Disbursement this Period 50.00
City Mercer	State PA Zip Code 16137	
Purpose of Disbursement Lincoln Day Dinner Elected Officials Ad Sponsorship		Transaction ID : SB17-EX138
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)	Lincoln Day Dinner Elected Officials Ad Sponsorship
State: District:	Category/Type 007	

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 01 / 28 / 2015
Mailing Address 300 First Street SE		Amount of Each Disbursement this Period 400.00
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Membership dues: Kelly and Stroia		Transaction ID : SB17-EX70
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)	Membership dues: Kelly and Stroia
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	1000.00
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 63 OF 91	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement MM / DD / YYYY 02 / 23 / 2015
Mailing Address 300 First Street SE			Amount of Each Disbursement this Period 877.69 Transaction ID : SB17-EX133
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Monthly charges		Category/ Type 001	Monthly charges
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. Capitol Hill Club			Date of Disbursement MM / DD / YYYY 02 / 23 / 2015
Mailing Address 300 First Street SE			Amount of Each Disbursement this Period 461.42 Transaction ID : SB17-EX134
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Monthly charges		Category/ Type 001	Monthly charges
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) c. Capitol Hill Club			Date of Disbursement MM / DD / YYYY 03 / 18 / 2015
Mailing Address 300 First Street SE			Amount of Each Disbursement this Period 264.26 Transaction ID : SB17-EX203
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Dues and meeting expenses		Category/ Type 001	Dues and meeting expenses
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: _____		

SUBTOTAL of Disbursements This Page (optional).....	877.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 91	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. SCP Group		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 309 Penn Avenue		Amount of Each Disbursement this Period 697.48
City Sharon	State PA Zip Code 16146	
Purpose of Disbursement Printing of letterhead and envelopes	Category/Type 006	Transaction ID : SB17-EX49
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)	Printing of letterhead and envelopes
State: District:		

Full Name (Last, First, Middle Initial) B. SCP Group		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 309 Penn Avenue		Amount of Each Disbursement this Period 13.29
City Sharon	State PA Zip Code 16146	
Purpose of Disbursement Printing	Category/Type 006	Transaction ID : SB17-EX51
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)	Printing
State: District:		

Full Name (Last, First, Middle Initial) c. SCP Group		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2015
Mailing Address 309 Penn Avenue		Amount of Each Disbursement this Period 78.51
City Sharon	State PA Zip Code 16146	
Purpose of Disbursement Letterhead printing	Category/Type 001	Transaction ID : SB17-EX106
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)	Letterhead printing
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	789.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 91			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. SCP Group		Date of Disbursement MM / DD / YYYY 02 / 25 / 2015
Mailing Address 309 Penn Avenue		Amount of Each Disbursement this Period 631.36
City Sharon	State PA Zip Code 16146	
Purpose of Disbursement Printing and mailing of 3/12 event invitations	Category/Type 007	Transaction ID : SB17-EX125
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)	Printing and mailing of 3/12 event invitations
State: District:		

Full Name (Last, First, Middle Initial) B. FH Group		Date of Disbursement MM / DD / YYYY 02 / 01 / 2015
Mailing Address 2320 West 8th Street		Amount of Each Disbursement this Period 878.30
City Erie	State PA Zip Code 16505	
Purpose of Disbursement Website design website/email hosting	Category/Type 004	Transaction ID : SB17-EX16
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)	Website design website/email hosting
State: District:		

Full Name (Last, First, Middle Initial) c. FH Group		Date of Disbursement MM / DD / YYYY 02 / 25 / 2015
Mailing Address 2320 West 8th Street		Amount of Each Disbursement this Period 58.30
City Erie	State PA Zip Code 16505	
Purpose of Disbursement Website hosting	Category/Type 001	Transaction ID : SB17-EX87
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)	Website hosting
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1567.96
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 91			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. FH Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2015
Mailing Address 2320 West 8th Street		Amount of Each Disbursement this Period 616.97 Transaction ID : SB17-EX150
City Erie	State PA Zip Code 16505	
Purpose of Disbursement Website and email hosting	Category/Type 001	Website and email hosting
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. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 254.38 Transaction ID : SB17-EX38
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Cellular phone service	Category/Type 001	Cellular phone service
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) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2015
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 304.29 Transaction ID : SB17-EX25
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Cellular phone service	Category/Type 001	Cellular phone service
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:		

SUBTOTAL of Disbursements This Page (optional).....	616.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 91	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement MM / DD / YYYY 02 / 25 / 2015
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 301.97
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Cellular phone service	Category/Type 001	Transaction ID : SB17-EX84
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:	Cellular phone service

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement MM / DD / YYYY 03 / 26 / 2015
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 305.45
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Cellular phone service	Category/Type 001	Transaction ID : SB17-EX141
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:	Cellular phone service

Full Name (Last, First, Middle Initial) C. Eastern Alliance Insurance Group		Date of Disbursement MM / DD / YYYY 02 / 24 / 2015
Mailing Address PO BOX 206		Amount of Each Disbursement this Period 612.00
City East Petersburg	State PA Zip Code 17520	
Purpose of Disbursement Workers comp insurance 3/1/15-3/1/16	Category/Type 001	Transaction ID : SB17-EX34
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:	Workers comp insurance 3/1/15-3/1/16

SUBTOTAL of Disbursements This Page (optional).....	1219.42
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 91		
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. LN Consulting		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015
Mailing Address 121 State Street		Amount of Each Disbursement this Period 2500.00
City Harrisburg	State PA Zip Code 17101	
Purpose of Disbursement January consulting fees	Category/Type 001	Transaction ID : SB17-EX4
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)	January consulting fees
State: District:		

Full Name (Last, First, Middle Initial) B. LN Consulting		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2015
Mailing Address 121 State Street		Amount of Each Disbursement this Period 2500.00
City Harrisburg	State PA Zip Code 17101	
Purpose of Disbursement February consulting	Category/Type 001	Transaction ID : SB17-EX19
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)	February consulting
State: District:		

Full Name (Last, First, Middle Initial) c. LN Consulting		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 121 State Street		Amount of Each Disbursement this Period 2500.00
City Harrisburg	State PA Zip Code 17101	
Purpose of Disbursement March 2015 consulting	Category/Type 001	Transaction ID : SB17-EX152
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)	March 2015 consulting
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7500.00
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 69 OF 91			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Carey Dunn Sirianni			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address PO Box 186			Amount of Each Disbursement this Period 1500.00
City Sewickley	State PA	Zip Code 16143	Transaction ID : SB17-EX2
Purpose of Disbursement January consulting fees		Category/ Type 001	
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	January consulting fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Carey Dunn Sirianni			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2015
Mailing Address PO Box 186			Amount of Each Disbursement this Period 1500.00
City Sewickley	State PA	Zip Code 16143	Transaction ID : SB17-EX14
Purpose of Disbursement February consulting fees		Category/ Type 001	
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	February consulting fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) c. Carey Dunn Sirianni			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015
Mailing Address PO Box 186			Amount of Each Disbursement this Period 1500.00
City Sewickley	State PA	Zip Code 16143	Transaction ID : SB17-EX155
Purpose of Disbursement March consulting		Category/ Type 001	
Candidate Name		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	March consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 91	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Carey Dunn Sirianni		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address PO Box 186		Amount of Each Disbursement this Period 59.50
City Sewickley	State PA	
Zip Code 16143	Purpose of Disbursement Postage reimbursement for Pgh event 3/11/2015	Transaction ID : SB17-EX142
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)	Postage reimbursement for Pgh event 3/11/2015
State: District:		

Full Name (Last, First, Middle Initial) B. Amy Petraglia		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 8623 Lexington Place		Amount of Each Disbursement this Period 1500.00
City Wexford	State PA	
Zip Code 15090	Purpose of Disbursement January consulting fees	Transaction ID : SB17-EX3
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)	January consulting fees
State: District:		

Full Name (Last, First, Middle Initial) c. Amy Petraglia		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2015
Mailing Address 8623 Lexington Place		Amount of Each Disbursement this Period 1500.00
City Wexford	State PA	
Zip Code 15090	Purpose of Disbursement February consulting fees	Transaction ID : SB17-EX15
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)	February consulting fees
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3059.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 91	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Amy Petraglia		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015
Mailing Address 8623 Lexington Place		Amount of Each Disbursement this Period 1500.00
City Wexford	State PA	
Zip Code 15090	Purpose of Disbursement March consulting	Transaction ID : SB17-EX156
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)	March consulting
State: District:		

Full Name (Last, First, Middle Initial) B. Dr. Sous Custom Catering		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2015
Mailing Address 108 North Main Street		Amount of Each Disbursement this Period 2264.40
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Catering for 3/12/2015 event	Transaction ID : SB17-EX148
Candidate Name	Category/Type 007	
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)	Catering for 3/12/2015 event
State: District:		

Full Name (Last, First, Middle Initial) c. Arnett Carbis Toothman		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2015
Mailing Address 2599 Wilmington Road		Amount of Each Disbursement this Period 525.00
City New Castle	State PA	
Zip Code 16105	Purpose of Disbursement Accounting fees: tax form preparation	Transaction ID : SB17-EX88
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)	Accounting fees: tax form preparation
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4289.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 91			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Fine Line Designs		Date of Disbursement MM / DD / YYYY 02 / 12 / 2015
Mailing Address 232 Poplar Avenue		Amount of Each Disbursement this Period 1316.25
City New Cumberland	State PA	Zip Code 17070
Purpose of Disbursement Consulting fees	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX20
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)	Consulting fees
State: District:		

Full Name (Last, First, Middle Initial) B. Alink Printing		Date of Disbursement MM / DD / YYYY 03 / 09 / 2015
Mailing Address 3189 Washington Pike		Amount of Each Disbursement this Period 404.23
City Bridgeville	State PA	Zip Code 15017
Purpose of Disbursement Printing of invitations for 3/11 event	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX151
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)	Printing of invitations for 3/11 event
State: District:		

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement MM / DD / YYYY 02 / 23 / 2015
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 26.08
City Hudson	State OH	Zip Code 44236
Purpose of Disbursement Shipping	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX135
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)	Shipping
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1746.56
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 91			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. FedEx		Date of Disbursement MM / DD / YYYY 02 / 26 / 2015
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 23.03
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Shipping	Category/Type 001	Transaction ID : SB17-EX136
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)	Shipping
State: District:		

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement MM / DD / YYYY 03 / 19 / 2015
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 23.75
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Shipping fees	Category/Type 001	Transaction ID : SB17-EX204
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)	Shipping fees
State: District:		

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement MM / DD / YYYY 03 / 20 / 2015
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 13.86
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Copies and office supplies	Category/Type 001	Transaction ID : SB17-EX191
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)	Copies and office supplies
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	60.64
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 74 OF 91			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. FedEx		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2015
Mailing Address 65 South Main Street		Amount of Each Disbursement this Period 23.75
City Hudson	State OH Zip Code 44236	
Purpose of Disbursement Shipping	Category/Type 001	Transaction ID : SB17-EX205
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)	Shipping
State: District:		

Full Name (Last, First, Middle Initial) B. Eagle Printery		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address 107 Bonnie Drive PO Box 550		Amount of Each Disbursement this Period 481.24
City Butler	State PA Zip Code 16002	
Purpose of Disbursement Campaign printed material	Category/Type 004	Transaction ID : SB17-EX30
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)	Campaign printed material
State: District:		

Full Name (Last, First, Middle Initial) c. Duquesne Club		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015
Mailing Address PO Box 387		Amount of Each Disbursement this Period 1134.77
City Pittsburgh	State PA Zip Code 15222	
Purpose of Disbursement Catering expense for 3/11/2015 event	Category/Type 001	Transaction ID : SB17-EX145
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)	Catering expense for 3/11/2015 event
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1639.76
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 75 OF 91			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. George J. Kelly Jr.		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2015
Mailing Address 233 West Pearl Street		Amount of Each Disbursement this Period 1858.54
City Butler	State PA	
Zip Code 16001	Purpose of Disbursement Travel reimbursement	Transaction ID : SB17-EX86
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)	Travel reimbursement
State: District:		

Full Name (Last, First, Middle Initial) B. Bradley Moore		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 11597 Route 97 N		Amount of Each Disbursement this Period 500.00
City Waterford	State PA	
Zip Code 16441	Purpose of Disbursement January consulting fees	Transaction ID : SB17-EX11
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)	January consulting fees
State: District:		

Full Name (Last, First, Middle Initial) c. Bradley Moore		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2015
Mailing Address 11597 Route 97 N		Amount of Each Disbursement this Period 500.00
City Waterford	State PA	
Zip Code 16441	Purpose of Disbursement February consulting fees	Transaction ID : SB17-EX28
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)	February consulting fees
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2858.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 91			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Bradley Moore		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015
Mailing Address 11597 Route 97 N		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17-EX157
City Waterford State PA Zip Code 16441	Purpose of Disbursement March consulting 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:	March consulting

Full Name (Last, First, Middle Initial) B. Matthew Stroia		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 3394 Mercer Road		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17-EX10
City New Castle State PA Zip Code 16105	Purpose of Disbursement January consulting fees 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:	January consulting fees

Full Name (Last, First, Middle Initial) c. Matthew Stroia		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2015
Mailing Address 3394 Mercer Road		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17-EX27
City New Castle State PA Zip Code 16105	Purpose of Disbursement February consulting 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:	February consulting

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 77 OF 91			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Matthew Stroia			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015	
Mailing Address 3394 Mercer Road			Amount of Each Disbursement this Period 500.00	
City New Castle	State PA	Zip Code 16105	Transaction ID : SB17-EX158	
Purpose of Disbursement March consulting		Category/ Type 001	March consulting	
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. Carmines			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2015	
Mailing Address 425 7th Street NW			Amount of Each Disbursement this Period 3012.50	
City Washington	State DC	Zip Code 20004	Transaction ID : SB17-EX41	
Purpose of Disbursement Campaign appreciation event food & beverage		Category/ Type 001	Campaign appreciation event food & beverage	
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) c. Starn Marketing			Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2015	
Mailing Address 1057 French Street			Amount of Each Disbursement this Period 1935.00	
City Meadville	State PA	Zip Code 16335	Transaction ID : SB17-EX18	
Purpose of Disbursement Website development		Category/ Type 004	Website development	
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:				

SUBTOTAL of Disbursements This Page (optional).....	5447.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Starn Marketing			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2015
Mailing Address 1057 French Street			Amount of Each Disbursement this Period 9935.00
City Meadville	State PA	Zip Code 16335	Transaction ID : SB17-EX147
Purpose of Disbursement Website development & design		Category/ Type 001	
Candidate Name			Website development & design
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. Altria Client Services			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2015
Mailing Address 101 Constitution Ave NW Suite 400W			Amount of Each Disbursement this Period 5500.00
City Washington	State DC	Zip Code 20001	Transaction ID : SB17-EX21
Purpose of Disbursement Tickets for Penguins game		Category/ Type 001	
Candidate Name			Tickets for Penguins game
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) c. H2 Capital Consulting			Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address 325 7th Street NW Suite 400			Amount of Each Disbursement this Period 2500.00
City Washington	State DC	Zip Code 20004	Transaction ID : SB17-EX31
Purpose of Disbursement January consulting fees		Category/ Type 001	
Candidate Name			January consulting fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	9935.00
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 79 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. H2 Capital Consulting		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2015
Mailing Address 325 7th Street NW Suite 400		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20004	Purpose of Disbursement February consulting fees	Transaction ID : SB17-EX32
Candidate Name	Category/Type 001	February consulting fees
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. H2 Capital Consulting		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2015
Mailing Address 325 7th Street NW Suite 400		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20004	Purpose of Disbursement Consulting - March	Transaction ID : SB17-EX159
Candidate Name	Category/Type 001	Consulting - March
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) c. H2 Capital Consulting		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address 325 7th Street NW Suite 400		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20004	Purpose of Disbursement Political consulting	Transaction ID : SB17-EX144
Candidate Name	Category/Type 001	Political consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7500.00
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 80 OF 91			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. H2 Capital Consulting		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address 325 7th Street NW Suite 400		Amount of Each Disbursement this Period 48.67
City Washington	State DC	Zip Code 20004
Purpose of Disbursement Reimbursement for taxi	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX143	
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)	Reimbursement for taxi
State: District:		

Full Name (Last, First, Middle Initial) B. Chik-Fil-A		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 4236 Wilson Blvd. #102		Amount of Each Disbursement this Period 265.65
City Arlington	State VA	Zip Code 22203
Purpose of Disbursement Volunteer appreciation event catering	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX42	
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)	Volunteer appreciation event catering
State: District:		

Full Name (Last, First, Middle Initial) C. Chik-Fil-A		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2015
Mailing Address 4236 Wilson Blvd. #102		Amount of Each Disbursement this Period 62.70
City Arlington	State VA	Zip Code 22203
Purpose of Disbursement Volunteer appreciation event catering expense	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX43	
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)	Volunteer appreciation event catering expense
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	377.02
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 81 OF 91	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Courtyard By Marriott			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2015	
Mailing Address 900 F Street NW			Amount of Each Disbursement this Period 444.27	
City Washington	State DC	Zip Code 20004	Transaction ID : SB17-EX44	
Purpose of Disbursement Hotel expense		Category/ Type 001	Hotel 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:				

Full Name (Last, First, Middle Initial) B. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015	
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 57.50	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX166	
Purpose of Disbursement Payment processing fees		Category/ Type 001	Payment processing fees	
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) c. US Airways			Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2015	
Mailing Address 111 W. Rio Salado Parkway			Amount of Each Disbursement this Period 518.70	
City Tempe	State AZ	Zip Code 85281	Transaction ID : SB17-EX102	
Purpose of Disbursement Airline tickets		Category/ Type 001	Airline tickets	
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:				

SUBTOTAL of Disbursements This Page (optional).....	1020.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 91			
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. US Airways			Date of Disbursement MM / DD / YYYY 02 / 23 / 2015
Mailing Address 111 W. Rio Salado Parkway			Amount of Each Disbursement this Period 431.00
City Tempe	State AZ	Zip Code 85281	
Purpose of Disbursement Airline tickets		Category/ Type 001	Transaction ID : SB17-EX119
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)		Airline tickets
State: District:			

Full Name (Last, First, Middle Initial) B. US Airways			Date of Disbursement MM / DD / YYYY 02 / 23 / 2015
Mailing Address 111 W. Rio Salado Parkway			Amount of Each Disbursement this Period 200.00
City Tempe	State AZ	Zip Code 85281	
Purpose of Disbursement Airline tickets/fees		Category/ Type 001	Transaction ID : SB17-EX120
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)		Airline tickets/fees
State: District:			

Full Name (Last, First, Middle Initial) c. Morton's The Steakhouse			Date of Disbursement MM / DD / YYYY 02 / 11 / 2015
Mailing Address 1050 Connecticut Ave NW #2			Amount of Each Disbursement this Period 2486.06
City Washington	State DC	Zip Code 20036	
Purpose of Disbursement Catering expenses		Category/ Type 007	Transaction ID : SB17-EX104
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)		Catering expenses
State: District:			

SUBTOTAL of Disbursements This Page (optional)	3117.06
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 91		
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Hertz Rent A Car		Date of Disbursement MM / DD / YYYY 02 / 19 / 2015
Mailing Address 3575 Fowler Street		Amount of Each Disbursement this Period 295.41
City Fort Myers	State FL	
Zip Code 33908	Purpose of Disbursement Rental car fees	Transaction ID : SB17-EX115
Candidate Name	Category/ Type 007	
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)	Rental car fees
State: District:		

Full Name (Last, First, Middle Initial) B. Cote D'Azur		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 11224 Tamiami Trail N		Amount of Each Disbursement this Period 216.68
City Naples	State FL	
Zip Code 34110	Purpose of Disbursement Meeting expenses	Transaction ID : SB17-EX117
Candidate Name	Category/ Type 007	
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)	Meeting expenses
State: District:		

Full Name (Last, First, Middle Initial) C. Ritz-Carlton		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 280 Vanderbilt Beach Road		Amount of Each Disbursement this Period 1564.20
City Naples	State FL	
Zip Code 34108	Purpose of Disbursement Hotel expenses	Transaction ID : SB17-EX118
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)	Hotel expenses
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2076.29
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Del Frisco's		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 950 I Street NW Suite 501		Amount of Each Disbursement this Period 3472.63
City Washington State DC Zip Code 20001	Purpose of Disbursement Catering expenses	Transaction ID : SB17-EX126
Candidate Name	Category/Type 007	Catering expenses
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. Verizon Center		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2015
Mailing Address 601 F Street NW		Amount of Each Disbursement this Period 1362.20
City Washington State DC Zip Code 20004	Purpose of Disbursement Catering expenses for fundraising event	Transaction ID : SB17-EX128
Candidate Name	Category/Type 001	Catering expenses for fundraising event
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) c. The Mansion		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2015
Mailing Address 151 Mansion Lane		Amount of Each Disbursement this Period 1500.00
City Butler State PA Zip Code 16001	Purpose of Disbursement Venue rental	Transaction ID : SB17-EX140
Candidate Name	Category/Type 007	Venue rental
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6334.83
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 85 OF 91	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Friends Of The NRA		Date of Disbursement MM / DD / YYYY 03 / 18 / 2015
Mailing Address 100 Wycliffe Way		Amount of Each Disbursement this Period 1000.00
City Butler	State PA	Zip Code 16001
Purpose of Disbursement Contribution/event tickets	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX146	
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)	Contribution/event tickets
State: District:		

Full Name (Last, First, Middle Initial) B. County Mayo		Date of Disbursement MM / DD / YYYY 03 / 12 / 2015
Mailing Address 2861 Mercer-West Middlesex Road		Amount of Each Disbursement this Period 800.00
City West Middlesex	State PA	Zip Code 16159
Purpose of Disbursement Entertainment for 3/12/2015 event	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX149	
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)	Entertainment for 3/12/2015 event
State: District:		

Full Name (Last, First, Middle Initial) c. Dubliner Restaurant		Date of Disbursement MM / DD / YYYY 03 / 23 / 2015
Mailing Address 4 F Street NW		Amount of Each Disbursement this Period 1125.89
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Catering expenses for event	Category/ Type 007	
Candidate Name	Transaction ID : SB17-EX192	
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)	Catering expenses for event
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2925.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 91	
	<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)
Mike Kelly For Congress

Full Name (Last, First, Middle Initial) A. Joe's Stone Crab Of DC		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2015
Mailing Address 750 15th Street NW		Amount of Each Disbursement this Period 375.00
City Washington State DC Zip Code 20005	Purpose of Disbursement Catering for event	
Candidate Name	Category/Type 007	Transaction ID : SB17-EX198
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)	Catering for event	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	93023.91

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

Transaction ID : **SC10-LN1**

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

[PERSONAL FUNDS]

Election: 2010

George J Jr J. Kelly Jr.

Primary

General

Other (specify) ▼

Mailing Address
239 W Pearl Street

City State ZIP Code
Butler PA 16001

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
36500 .00 36500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09

30

2010

12

31

2050

0.00

% (apr)

Yes

No

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

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

SUBTOTALS This Period This Page (optional)..... 36500.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

Transaction ID : **SC10-LN2**

LOAN SOURCE Full Name (Last, First, Middle Initial)
George J Jr J. Kelly Jr.

[PERSONAL FUNDS]

Election: 2010

Primary
 General
 Other (specify) ▼

Mailing Address
239 W Pearl Street

City State ZIP Code
Butler PA 16001

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
75000 .00 75000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 06 / D 30 / Y 2010 M 12 / D 31 / Y 2050 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 75000.00

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Mike Kelly For Congress

Transaction ID : **SC10-LN3**

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

George J Jr J. Kelly Jr.

[PERSONAL FUNDS]

Election: 2010

Primary
 General
 Other (specify) ▼

Mailing Address
239 W Pearl Street

City State ZIP Code
Butler PA 16001

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
25000 .00 25000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 12 / Y 2010 M 12 / D 31 / Y 2050 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 25000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC10-LN4**
Mike Kelly For Congress

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

City	State	ZIP Code
Butler	PA	16001

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000	.00	100000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 07 / Y 2010 Y	M 12 / D 31 / Y 2050 Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	<input type="text" value="100000.00"/>
TOTALS This Period (last page in this line only).....	<input type="text"/>

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC10-LN5**
Mike Kelly For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2010
George J Jr J. Kelly Jr.
 Primary
 General
 Other (specify) ▼

Mailing Address
 239 W Pearl Street
 City State ZIP Code
 Butler PA 16001

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
43495	2000.00	41495.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 31 / Y 2010	M 12 / D 31 / Y 2050	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	▶	41495.00
TOTALS This Period (last page in this line only).....	▶	277995.00

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