

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

BOB BRADY FOR CONGRESS

ADDRESS (number and street) 12518 Chilton Road

Check if different than previously reported. (ACC) Philadelphia PA 19154

2. **FEC IDENTIFICATION NUMBER** ▼

C C00333740

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

PA 01

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 MM / DD / YYYY in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period MM / DD / YYYY through MM / DD / YYYY
04 / 07 / 2016 through 06 / 30 / 2016

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 Louis J Farinella

Signature of Treasurer Louis J Farinella [Electronically Filed] Date

MM / DD / YYYY
07 / 15 / 2016

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
BOB BRADY FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	130800.00	569006.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	130800.00	569006.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	39985.30	282150.69
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	39985.30	282150.69
8. Cash on Hand at Close of Reporting Period (from Line 27).....	561242.82	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	5000.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

BOB BRADY FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	79000.00	330125.00
(ii) Unitemized.....	100.00	3681.00
(iii) TOTAL of contributions from individuals ▶	79100.00	333806.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	51700.00	235200.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	130800.00	569006.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	74.31	6134.21
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	130874.31	575140.21

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	39985.30	282150.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	17120.00	310733.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	57105.30	592883.69

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	487473.81
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	130874.31
25. SUBTOTAL (add Line 23 and Line 24).....	618348.12
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	57105.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	561242.82

**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 51
	<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)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
L Jay Agnes

Mailing Address 2101 Penrose Avenue

City Philadelphia State PA Zip Code 19145

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

Name of Employer P. Agnes Occupation Builder

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11406

Amount of Each Receipt this Period
 1000.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Maddalena Berardi

Mailing Address 52 Pine View Dr.

City Huntingdon Valley State PA Zip Code 19006

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11426

Amount of Each Receipt this Period
 500.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Arthur Block

Mailing Address 8217 Marion Road

City Elkins Park State PA Zip Code 19027

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

Name of Employer Comcast Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11383

Amount of Each Receipt this Period
 2700.00

Memo Item Contribution

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 6 OF 51
	<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)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Charles Breslin

Mailing Address 105 South 18th Street
#5B

City Philadelphia State PA Zip Code 19103

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

Name of Employer Rittenhouse Consulting Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11386

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Dr. L H Brown

Mailing Address 300 Front Street

City Philadelphia State PA Zip Code 19106-4310

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

Name of Employer Temple Group Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11410

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Deborah Cianfrani

Mailing Address 32 N. Front St.

City Philadelphia State PA Zip Code 19106

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

Name of Employer Attorney Occupation Cianfrani Law LLC

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11440

Amount of Each Receipt this Period
250.00

Memo Item Contribution

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 7 OF 51
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

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

Mailing Address 7309 Huron Lane

City Philadelphia State PA Zip Code 19119

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

Name of Employer Comcast Corporation Occupation EVP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : SA11AI.11432

Amount of Each Receipt this Period
100.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Mr. David L. Cohen

Mailing Address 7309 Huron Lane

City Philadelphia State PA Zip Code 19119

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

Name of Employer Comcast Corporation Occupation EVP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : SA11AI.11433

Amount of Each Receipt this Period
300.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Ms Rhonda Cohen

Mailing Address 7309 Huron Lane

City Philadelphia State PA Zip Code 19119

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

Name of Employer Self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : SA11AI.11434

Amount of Each Receipt this Period
100.00

Memo Item Contribution

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

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

500.00

**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 51
	<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)
BOB BRADY FOR CONGRESS

A. Ms Rhonda Cohen
 Full Name (Last, First, Middle Initial)
 Mailing Address 7309 Huron Lane
 City Philadelphia State PA Zip Code 19119
 FEC ID number of contributing federal political committee. C
 Name of Employer Self Occupation Attorney
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016
Transaction ID : SA11AI.11435
 Amount of Each Receipt this Period
 300.00
 Memo Item Contribution

B. Mr. Stewart L Cohen
 Full Name (Last, First, Middle Initial)
 Mailing Address 620 Montgomery School Lane
 City Wynnewood State PA Zip Code 19096
 FEC ID number of contributing federal political committee. C
 Name of Employer Cohen, Placitella and Roth, PC Occupation Attorney
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016
Transaction ID : SA11AI.11396
 Amount of Each Receipt this Period
 2700.00
 Memo Item Contribution

C. J. Dawn Coradino
 Full Name (Last, First, Middle Initial)
 Mailing Address 2470 White Horse Road
 City Berwyn State PA Zip Code 19312
 FEC ID number of contributing federal political committee. C
 Name of Employer N/A Occupation Homemaker
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016
Transaction ID : SA11AI.11354
 Amount of Each Receipt this Period
 2700.00
 Memo Item Contribution

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 9 OF 51
	<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)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Sandra Cozen

Mailing Address 1230 Mt. Pleasant Road

City Villanova State PA Zip Code 19085

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : SA11AI.11356

Amount of Each Receipt this Period
2700.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Mr. M. Walter Dalessio Jr.

Mailing Address 580 Wigard Avenue

City Philadelphia State PA Zip Code 19128

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

Name of Employer Northmarq Advisors LLC Occupation Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : SA11AI.11371

Amount of Each Receipt this Period
700.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Mr. M. Walter Dalessio Jr.

Mailing Address 580 Wigard Avenue

City Philadelphia State PA Zip Code 19128

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

Name of Employer Northmarq Advisors LLC Occupation Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : SA11AI.11372

Amount of Each Receipt this Period
1300.00

Memo Item Contribution

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

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

4700.00

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

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

FOR LINE NUMBER: PAGE 10 OF 51
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms Jana Dandrea

Mailing Address 1368 Venezia Avenue

City Vineland State NJ Zip Code 08361

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

Name of Employer D'Andrea Produce Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11403

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Peter Dandrea

Mailing Address 3665 N Mill Road

City Vineland State NJ Zip Code 08360

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

Name of Employer D'Andrea Produce Occupation Salesman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11405

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Peter DePaul

Mailing Address 1750 Walton Road
PO Box 1647

City Blue Bell State PA Zip Code 19422-0465

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

Name of Employer The DePaul Group Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11416

Amount of Each Receipt this Period
700.00

Memo Item Contribution

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

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

2700.00

**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 51
	<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)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Peter DePaul

Mailing Address 1750 Walton Road
PO Box 1647

City State Zip Code
Blue Bell PA 19422-0465

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

Name of Employer Occupation
The DePaul Group President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : SA11AI.11417

Amount of Each Receipt this Period
300.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Steve Dolcemaschio

Mailing Address 4116 Tivoli Ave

City State Zip Code
Los Angeles CA 90066-5612

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

Name of Employer Occupation
Comcast NBCUniversal COO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : SA11AI.11381

Amount of Each Receipt this Period
2700.00

Memo Item Contribution

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

Mailing Address 201 Cheswold Lane

City State Zip Code
Haverford PA 19041

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

Name of Employer Occupation
Drexel University President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : SA11AI.11401

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 12 OF 51
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

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

Mailing Address 828 Conshohocken State Road

City Gladwyne State PA Zip Code 19035

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

Name of Employer The Graham Company Occupation Chairman / CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11360

Amount of Each Receipt this Period
 2700.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Ms Rebecca Halkias

Mailing Address 101 Constitution Avenue NW #900

City Washington State DC Zip Code 20001

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

Name of Employer The C2 Group Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2016

Transaction ID : SA11AI.11466

Amount of Each Receipt this Period
 1000.00

Memo Item Contribution

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

Mailing Address 264 Ravenscliff Rd

City St. Davids State PA Zip Code 19087-4732

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

Name of Employer Comcast Occupation SVP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11378

Amount of Each Receipt this Period
 1500.00

Memo Item Contribution

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

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

5200.00

**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 51
	<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)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. C. Edward Hillis

Mailing Address 8470 Limekiln Pike
#514

City Wyncote State PA Zip Code 19095

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

Name of Employer Domus, Inc. Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11414

Amount of Each Receipt this Period
900.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Mr. C. Edward Hillis

Mailing Address 8470 Limekiln Pike
#514

City Wyncote State PA Zip Code 19095

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

Name of Employer Domus, Inc. Occupation President

Receipt For: 2018
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11415

Amount of Each Receipt this Period
100.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Robert Leipziger

Mailing Address 1391 Taylor Drive

City Langhorne State PA Zip Code 19047

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

Name of Employer Rob's Auto Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11409

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 51
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Robert Levin		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2016	
Mailing Address 12270 Townsend Road		Transaction ID : SA11AI.11420	
City Philadelphia	State PA	Amount of Each Receipt this Period _____ 100.00	
Zip Code 19154		<input type="checkbox"/> Memo Item Contribution	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 2700.00	
Name of Employer Holt Cigar Company	Occupation CEO	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2700.00		

Full Name (Last, First, Middle Initial) B. Robert Levin		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2016	
Mailing Address 12270 Townsend Road		Transaction ID : SA11AI.11421	
City Philadelphia	State PA	Amount of Each Receipt this Period _____ 900.00	
Zip Code 19154		<input type="checkbox"/> Memo Item Contribution	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 3600.00	
Name of Employer Holt Cigar Company	Occupation CEO	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 3600.00		

Full Name (Last, First, Middle Initial) C. Eugene Edw. J. Maier		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2016	
Mailing Address 1637 North Street		Transaction ID : SA11AI.11438	
City Philadelphia	State PA	Amount of Each Receipt this Period _____ 250.00	
Zip Code 19130		<input type="checkbox"/> Memo Item Contribution	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 250.00	
Name of Employer Philadelphia County Court	Occupation Judge	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1250.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 51
	<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)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
P Douglas Maier

Mailing Address 1167 Bridge Street

City Philadelphia State PA Zip Code 19124

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

Name of Employer Self Occupation Accountant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11437

Amount of Each Receipt this Period
 250.00

Memo Item Contribution

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

Mailing Address 1433 Revelation Drive

City Meadow Brook State PA Zip Code 19046

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

Name of Employer Muller, Inc. Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11399

Amount of Each Receipt this Period
 950.00

Memo Item Contribution

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

Mailing Address 1433 Revelation Drive

City Meadow Brook State PA Zip Code 19046

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

Name of Employer Muller, Inc. Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11400

Amount of Each Receipt this Period
 550.00

Memo Item Contribution

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 16 OF 51
	<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)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Obermayer Rebmann Maxwell & Hippel LLP

Mailing Address 1617 JFK Blvd.
19th Floor

City Philadelphia State PA Zip Code 19103-1895

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11422

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

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

Mailing Address 4945 Klingle St NW

City Washington State DC Zip Code 20016

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

Name of Employer Occupation
The Temple Group Inc. Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11412

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Henry Oster

Mailing Address 13162 Boca De Canon Lane

City Los Angeles State CA Zip Code 90049

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

Name of Employer Occupation
Comcast Spotlight COO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11389

Amount of Each Receipt this Period
1750.00

Memo Item Contribution

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

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

3750.00

**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 51
	<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)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Christopher M Placitella

Mailing Address 15 Goose Point Drive

City State Zip Code
Colts Neck NJ 07722-2112

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

Name of Employer Occupation
Cohen, Placitella and Roth, PC Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11397

Amount of Each Receipt this Period
2700.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Joan Richards

Mailing Address 100 West Sproul Road

City State Zip Code
Springfield PA 19064

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

Name of Employer Occupation
President Crozer-Keystone Health System Inc.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11430

Amount of Each Receipt this Period
500.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Philip Rinaldi

Mailing Address 1097 Westbrook Road

City State Zip Code
Bridgewater NJ 08807

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

Name of Employer Occupation
Philadelphia Energy Solutions CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11373

Amount of Each Receipt this Period
100.00

Memo Item Contribution

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: PAGE 18 OF 51
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Philip Rinaldi

Mailing Address 1097 Westbrook Road

City State Zip Code
Bridgewater NJ 08807

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

Name of Employer Occupation
Philadelphia Energy Solutions CEO

Receipt For: 2018
 Primary General
 Other (specify)

Election Cycle-to-Date
7300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11374

Amount of Each Receipt this Period
 1900.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Harry Roth

Mailing Address 2217 Saint James Street

City State Zip Code
Philadelphia PA 19103

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

Name of Employer Occupation
Cohen, Placitella and Roth, PC Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11398

Amount of Each Receipt this Period
 2700.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Ronald Rubin

Mailing Address 200 S. Broad Street
3rd Floor

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
PREIT Chairman & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11346

Amount of Each Receipt this Period
 2700.00

Memo Item Contribution

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

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

7300.00

**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 51
	<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)
BOB BRADY FOR CONGRESS

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

Mailing Address 200 S. Broad Street
3rd Floor

City Philadelphia State PA Zip Code 19102

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

Name of Employer PREIT Occupation Chairman & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11347

Amount of Each Receipt this Period
2700.00

Memo Item Contribution

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

Mailing Address 2600 One Commerce Sq.

City Philadelphia State PA Zip Code 19103-7018

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

Name of Employer Stradley Ronon Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11376

Amount of Each Receipt this Period
1500.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Eddy Sherman

Mailing Address 2401 Pennsylvania Ave
#15C42

City Philadelphia State PA Zip Code 19130

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

Name of Employer William Penn Ticket Agency Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11418

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

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

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

5200.00

**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 51
	<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)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Simone Family Partnership LP

Mailing Address 6825 Northwitch Drive

City Philadelphia State PA Zip Code 19153-3412

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11361

Amount of Each Receipt this Period
 2700.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Dr. Bayard Thayer Storey

Mailing Address 1919 Brandywine Street

City Philadelphia State PA Zip Code 19130-3202

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

Name of Employer Occupation
 University of Pennsylvania Prof. Emeritus

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11358

Amount of Each Receipt this Period
 200.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Dr. Bayard Thayer Storey

Mailing Address 1919 Brandywine Street

City Philadelphia State PA Zip Code 19130-3202

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

Name of Employer Occupation
 University of Pennsylvania Prof. Emeritus

Receipt For: 2018
 Primary General
 Other (specify)

Election Cycle-to-Date 7900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11359

Amount of Each Receipt this Period
 2500.00

Memo Item Contribution

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

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

5400.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 21 OF 51

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

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

Mailing Address 95 W. Levering Mill Rd

City Bala Cynwyd State PA Zip Code 19004

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

Name of Employer Comcast Occupation HR Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2016

Transaction ID : SA11AI.11451

Amount of Each Receipt this Period
 2700.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Swanson Street Associates LP

Mailing Address 350 Sentry Parkway
 Bldg 630 Suite 300

City Blue Bell State PA Zip Code 19422

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11375

Amount of Each Receipt this Period
 2000.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Charlie Thurston

Mailing Address 5 Times Square

City New York State NY Zip Code 10036

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

Name of Employer Comcast Spotlight Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11387

Amount of Each Receipt this Period
 2700.00

Memo Item Contribution

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

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

7400.00

**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 51
	<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)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Tohono O'Odham Nation

Mailing Address **PO Box 837**

City **Sells** State **AZ** Zip Code **85634**

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

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 02 / 2016

Transaction ID : SA11AI.11444

Amount of Each Receipt this Period
2000.00

Memo Item Contribution

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

Mailing Address **1807 Delancey Place**

City **Philadelphia** State **PA** Zip Code **19103**

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

Name of Employer **Self** Occupation **Investor**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : SA11AI.11392

Amount of Each Receipt this Period
2700.00

Memo Item Contribution

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

Mailing Address **8201 Saint Martins Lane**

City **Philadelphia** State **PA** Zip Code **19118**

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

Name of Employer **Comcast** Occupation **Executive**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : SA11AI.11394

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

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 23 OF 51
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. David Watson		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 25 / 2016	
Mailing Address 4323 Boxwood Road		Transaction ID : SA11AI.11391	
City Bryn Mawr	State PA	Zip Code 19010	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer Comcast Corp	Occupation Executive		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		
		<input type="checkbox"/> Memo Item Contribution	

Full Name (Last, First, Middle Initial) B. Philip Weinberg		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 23 / 2016	
Mailing Address 136 Fisher Road		Transaction ID : SA11AI.11458	
City Jenkintown	State PA	Zip Code 19046	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer Comcast Spectacor, LP	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		
		<input type="checkbox"/> Memo Item Contribution	

Full Name (Last, First, Middle Initial) C. Michael Weiss		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 25 / 2016	
Mailing Address 202 E. 13th St		Transaction ID : SA11AI.11407	
City Philadelphia	State PA	Zip Code 19107	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Woody's Bar	Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
		<input type="checkbox"/> Memo Item Contribution	

SUBTOTAL of Receipts This Page (optional).....	5700.00
TOTAL This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 24 OF 51
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Joseph S Zuritsky

Mailing Address 1706 Rittenhouse Square
Unit #1801

City Philadelphia State PA Zip Code 19103

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

Name of Employer Parkway Corp Occupation Chairman & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11AI.11411

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

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

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

1000.00

79000.00

**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 51
	<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)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL EMPLOYEES, AFL-CIO

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C3000798

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2016

Transaction ID : SA11C.11465

Amount of Each Receipt this Period
 5000.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF TEACHERS, AFL-CIO COMMITTEE ON POLITICAL EDUCATION

Mailing Address 555 New Jersey Avenue, NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11C.11349

Amount of Each Receipt this Period
 5000.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
AMERICAN POSTAL WORKERS UNION COMMITTEE ON POLITICAL ACTION

Mailing Address 1300 L STREET NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010322

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2016

Transaction ID : SA11C.11447

Amount of Each Receipt this Period
 1000.00

Memo Item Contribution

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

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

11000.00

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

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

FOR LINE NUMBER: PAGE 26 OF 51
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN POSTAL WORKERS UNION COMMITTEE ON POLITICAL ACTION

Mailing Address 1300 L STREET NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010322

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2016

Transaction ID : SA11C.11449

Amount of Each Receipt this Period
 1000.00

Memo Item Contribution

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

Mailing Address 1000 WILSON BLVD. SUITE 1825

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00373696

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11C.11424

Amount of Each Receipt this Period
 1000.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
DRIVE - DEMOCRAT, REPUBLICAN, INDEPENDENT VOTER EDUCATION - PAC FOR INT'L BROTHERHOOD OF T

Mailing Address 25 LOUISIANA AVE., NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2016

Transaction ID : SA11C.11455

Amount of Each Receipt this Period
 5000.00

Memo Item Contribution

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 27 OF 51
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial)
FEDERAL BIPARTISAN VOLUNTARY PUBLIC AFFAIRS COMMITTEE OF THE PNC FINANCIAL SERVICES GROUP.

A. Mailing Address 249 FIFTH AVE., 21ST FLOOR

City State Zip Code
PITTSBURGH PA 15222

FEC ID number of contributing federal political committee. **C** C00186064

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11C.11364

Amount of Each Receipt this Period
2700.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)
GRIDIRON-PAC

B. Mailing Address 345 PARK AVENUE

City State Zip Code
NEW YORK NY 10154

FEC ID number of contributing federal political committee. **C** C00451153

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11C.11366

Amount of Each Receipt this Period
2500.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)
INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC

C. Mailing Address 1750 NEW YORK AVE NW

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11C.11370

Amount of Each Receipt this Period
2500.00

Memo Item Contribution

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

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

7700.00

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

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

FOR LINE NUMBER: PAGE 28 OF 51
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
INTERNATIONAL ASSOCIATION OF HEAT & FROST INSULATORS AND ASBESTOS WORKERS P A C

Mailing Address 9602 MARTIN LUTHER KING HIGHWAY

City LANHAM State MD Zip Code 20706

FEC ID number of contributing federal political committee. **C** C00115527

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11C.11368

Amount of Each Receipt this Period
 2500.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL 98 COMMITTEE ON POLITICAL EDUCATION

Mailing Address 1719 Spring Garden Street

City Philadelphia State PA Zip Code 19130

FEC ID number of contributing federal political committee. **C** C00162818

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11C.11344

Amount of Each Receipt this Period
 5000.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL 98 COMMITTEE ON POLITICAL EDUCATION

Mailing Address 1719 Spring Garden Street

City Philadelphia State PA Zip Code 19130

FEC ID number of contributing federal political committee. **C** C00162818

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11C.11345

Amount of Each Receipt this Period
 5000.00

Memo Item Contribution

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

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

12500.00

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

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

FOR LINE NUMBER: PAGE 29 OF 51
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

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

Mailing Address 1325 Massachusetts Ave., NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11C.11369

Amount of Each Receipt this Period
 2500.00

Memo Item Contribution

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

Mailing Address 1325 Massachusetts Ave., NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11C.11423

Amount of Each Receipt this Period
 1000.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)

Mailing Address 25 Massachusetts Avenue, NW #100

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11C.11348

Amount of Each Receipt this Period
 5000.00

Memo Item Contribution

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

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

8500.00

**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 51
	<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)
BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NEA FUND FOR CHILDREN AND PUBLIC EDUCATION

Mailing Address 1201 16th St NW Ste 420

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016

Transaction ID : SA11C.11353

Amount of Each Receipt this Period
 4000.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
NELSON, MULLINS, RILEY & SCARBOROUGH FEDERAL POLITICAL COMMITTEE

Mailing Address 1320 MAIN STREET, 17TH FLOOR
PO BOX 11070

City COLUMBIA State SC Zip Code 29201

FEC ID number of contributing federal political committee. **C** C00278895

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2016

Transaction ID : SA11C.11457

Amount of Each Receipt this Period
 1000.00

Memo Item Contribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

5000.00

51700.00

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

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

FOR LINE NUMBER: PAGE 31 OF 51
(check only one)
 11a 11b 11c 11d 15
 12 13a 13b 14

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

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

Mailing Address PO Box 535230

City State Zip Code
Pittsburgh PA 15253

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
472.41

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2016

Transaction ID : SA15.11243

Amount of Each Receipt this Period
24.05

Memo Item
MM Interest

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

Mailing Address PO Box 535230

City State Zip Code
Pittsburgh PA 15253

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
497.26

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2016

Transaction ID : SA15.11244

Amount of Each Receipt this Period
24.85

Memo Item
MM Interest

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

Mailing Address PO Box 535230

City State Zip Code
Pittsburgh PA 15253

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
521.31

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : SA15.11246

Amount of Each Receipt this Period
24.05

Memo Item
MM Interest

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

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

72.95

72.95

**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 32 OF 51			
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2016
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 213.30
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Online Contribution Fees	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Disbursement For: 2016	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

Full Name (Last, First, Middle Initial) B. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2016
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 468.08
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Online Contribution Fees	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Disbursement For: 2016	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

Full Name (Last, First, Middle Initial) c. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2016
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 110.60
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Online Contribution Fee	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Disbursement For: 2016	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

SUBTOTAL of Disbursements This Page (optional).....	791.98
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 33 OF 51	
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2016
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 79.00
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Online Contribution Fee	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Category/ Type	Transaction ID : SB17.11460
Office Sought: <input checked="" 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: PA District: 01		

Full Name (Last, First, Middle Initial) B. AOL Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2016
Mailing Address 770 Broadway		Amount of Each Disbursement this Period 15.99
City New York	State NY	
Zip Code 10003	Purpose of Disbursement Internet Service	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Category/ Type	Transaction ID : SB17.11305
Office Sought: <input checked="" 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: PA District: 01		

Full Name (Last, First, Middle Initial) c. AOL Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2016
Mailing Address 770 Broadway		Amount of Each Disbursement this Period 15.99
City New York	State NY	
Zip Code 10003	Purpose of Disbursement Internet	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Category/ Type	Transaction ID : SB17.11324
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

SUBTOTAL of Disbursements This Page (optional).....	110.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 51	
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ms Linda August		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016
Mailing Address 2401 Pennsylvania Avenue 6B23		Amount of Each Disbursement this Period 4000.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.11266
City Philadelphia State PA Zip Code 19130	Purpose of Disbursement Fund Raising Consulting - May 2016	
Candidate Name BOB BRADY FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 01	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Ms Linda August		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016
Mailing Address 2401 Pennsylvania Avenue 6B23		Amount of Each Disbursement this Period 636.47 <input type="checkbox"/> Memo Item Transaction ID : SB17.11267
City Philadelphia State PA Zip Code 19130	Purpose of Disbursement Expense reimbursement	
Candidate Name BOB BRADY FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Ms Linda August		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2016
Mailing Address 2401 Pennsylvania Avenue 6B23		Amount of Each Disbursement this Period 4000.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.11292
City Philadelphia State PA Zip Code 19130	Purpose of Disbursement Fund Raising Consulting June 2016	
Candidate Name BOB BRADY FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 01	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	8636.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 51			
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ms Linda August		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2016
Mailing Address 2401 Pennsylvania Avenue 6B23		Amount of Each Disbursement this Period 4000.00
City Philadelphia	State PA Zip Code 19130	
Purpose of Disbursement Fund Raising Consulting June 2016		<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11286
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01	Category/Type	

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2016
Mailing Address PO Box 15220		Amount of Each Disbursement this Period 1143.00
City Wilmington	State DE Zip Code 19886	
Purpose of Disbursement Auto Loan		<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11273
Office Sought: <input checked="" 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: PA District: 01	Category/Type	

Full Name (Last, First, Middle Initial) c. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2016
Mailing Address PO Box 15220		Amount of Each Disbursement this Period 1143.00
City Wilmington	State DE Zip Code 19886	
Purpose of Disbursement Auto Loan		<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11288
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	6286.00
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 36 OF 51	
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City & State		Date of Disbursement
Mailing Address 61 Broadway Suite 2235		M M / D D / Y Y Y Y 06 / 03 / 2016
City New York	State NY	Amount of Each Disbursement this Period
Zip Code 10006		400.00
Purpose of Disbursement PPR Print Ad	Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11283
Office Sought: <input checked="" 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: PA District: 01		

Full Name (Last, First, Middle Initial) B. City & State		Date of Disbursement
Mailing Address 61 Broadway Suite 2235		M M / D D / Y Y Y Y 06 / 14 / 2016
City New York	State NY	Amount of Each Disbursement this Period
Zip Code 10006		400.00
Purpose of Disbursement PPR Print Ad	Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11291
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

Full Name (Last, First, Middle Initial) c. First National Bank VISA		Date of Disbursement
Mailing Address PO Box 2557		M M / D D / Y Y Y Y 05 / 03 / 2016
City Omaha	State NE	Amount of Each Disbursement this Period
Zip Code 68103		37.73
Purpose of Disbursement VISA Payment	Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11274
Office Sought: <input checked="" 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: PA District: 01		

SUBTOTAL of Disbursements This Page (optional).....	837.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 51	
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. First National Bank VISA		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2016
Mailing Address PO Box 2557		Amount of Each Disbursement this Period 37.73
City Omaha	State NE Zip Code 68103	
Purpose of Disbursement Visa payment		<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11287
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01	Category/Type	

Full Name (Last, First, Middle Initial) B. Mr. Jamie Fleet		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2016
Mailing Address 122 East Middle Street		Amount of Each Disbursement this Period 257.21
City Gettysburg	State PA Zip Code 17325	
Purpose of Disbursement Reimbursement		<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11282
Office Sought: <input checked="" 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: PA District: 01	Category/Type	

Full Name (Last, First, Middle Initial) c. GM Financial Leasing		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2016
Mailing Address 75 Remittance Drive Suite 1738		Amount of Each Disbursement this Period 971.76
City Chicago	State IL Zip Code 60675-1738	
Purpose of Disbursement Auto Lease		<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11268
Office Sought: <input checked="" 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: PA District: 01	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1266.70
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 38 OF 51	
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GM Financial Leasing		Date of Disbursement MM / DD / YYYY 05 / 17 / 2016
Mailing Address 75 Remittance Drive Suite 1738		Amount of Each Disbursement this Period 971.76 <input type="checkbox"/> Memo Item Transaction ID : SB17.11280
City Chicago	State IL Zip Code 60675-1738	
Purpose of Disbursement Auto Lease		Category/ Type
Candidate Name BOB BRADY FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

Full Name (Last, First, Middle Initial) B. GM Financial Leasing		Date of Disbursement MM / DD / YYYY 06 / 15 / 2016
Mailing Address 75 Remittance Drive Suite 1738		Amount of Each Disbursement this Period 971.76 <input type="checkbox"/> Memo Item Transaction ID : SB17.11290
City Chicago	State IL Zip Code 60675-1738	
Purpose of Disbursement Auto Lease		Category/ Type
Candidate Name BOB BRADY FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

Full Name (Last, First, Middle Initial) c. House Gift Shop		Date of Disbursement MM / DD / YYYY 04 / 29 / 2016
Mailing Address Longworth House Office Bldg B218 Independence Ave & CS. Capitol St		Amount of Each Disbursement this Period 131.45 <input type="checkbox"/> Memo Item Transaction ID : SB17.11298
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Gifts		Category/ Type
Candidate Name BOB BRADY FOR CONGRESS		
Office Sought: <input checked="" 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: PA District: 01		

SUBTOTAL of Disbursements This Page (optional).....	2074.97
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 39 OF 51	
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. House Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2016
Mailing Address Longworth House Office Bldg B218 Independence Ave & CS. Capitol St		Amount of Each Disbursement this Period 209.00
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Gifts	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11311
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

Full Name (Last, First, Middle Initial) B. La Famiglia Restaurant		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2016
Mailing Address 8 South Front Street		Amount of Each Disbursement this Period 1640.11
City Philadelphia	State PA Zip Code 19106	
Purpose of Disbursement Event	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11281
Office Sought: <input checked="" 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: PA District: 01		

Full Name (Last, First, Middle Initial) c. La Piazza		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2016
Mailing Address 4600 Pacific Avenue		Amount of Each Disbursement this Period 122.65
City Wildwood	State NJ Zip Code 08260-4644	
Purpose of Disbursement Meeting / Meal	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11325
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

SUBTOTAL of Disbursements This Page (optional).....	1971.76
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 40 OF 51	
	<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)
BOB BRADY FOR CONGRESS

A. Main Line Riggins

Full Name (Last, First, Middle Initial)
Mailing Address 1435 City Ave

City Wynnewood State PA Zip Code 19096

Purpose of Disbursement Fuel

Candidate Name **BOB BRADY FOR CONGRESS**

Office Sought: House Senate President
State: PA District: 01

Disbursement For: 2016
 Primary General
 Other (specify)

Date of Disbursement: 04 / 26 / 2016

Amount of Each Disbursement this Period: 58.29

Memo Item

Transaction ID : **SB17.11297**

B. Main Line Riggins

Full Name (Last, First, Middle Initial)
Mailing Address 1435 City Ave

City Wynnewood State PA Zip Code 19096

Purpose of Disbursement May Fuel

Candidate Name **BOB BRADY FOR CONGRESS**

Office Sought: House Senate President
State: PA District: 01

Disbursement For: 2016
 Primary General
 Other (specify)

Date of Disbursement: 05 / 23 / 2016

Amount of Each Disbursement this Period: 96.95

Memo Item

Transaction ID : **SB17.11310**

c. Main Line Riggins

Full Name (Last, First, Middle Initial)
Mailing Address 1435 City Ave

City Wynnewood State PA Zip Code 19096

Purpose of Disbursement Fuel

Candidate Name **BOB BRADY FOR CONGRESS**

Office Sought: House Senate President
State: PA District: 01

Disbursement For: 2016
 Primary General
 Other (specify)

Date of Disbursement: 06 / 27 / 2016

Amount of Each Disbursement this Period: 36.36

Memo Item

Transaction ID : **SB17.11340**

SUBTOTAL of Disbursements This Page (optional) 191.60

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 51			
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Marcum LLP		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2016
Mailing Address 1600 Market Street 32nd Floor		Amount of Each Disbursement this Period 1960.00 <input type="checkbox"/> Memo Item
City Philadelphia	State PA Zip Code 19103	
Purpose of Disbursement Accounting Services		Transaction ID : SB17.11276
Candidate Name BOB BRADY FOR CONGRESS		
Office Sought: <input checked="" 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: PA District: 01		

Full Name (Last, First, Middle Initial) B. Marcum LLP		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2016
Mailing Address 1600 Market Street 32nd Floor		Amount of Each Disbursement this Period 2989.00 <input type="checkbox"/> Memo Item
City Philadelphia	State PA Zip Code 19103	
Purpose of Disbursement Accounting Services		Transaction ID : SB17.11285
Candidate Name BOB BRADY FOR CONGRESS		
Office Sought: <input checked="" 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: PA District: 01		

Full Name (Last, First, Middle Initial) c. Marlyn Service Garage		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016
Mailing Address 6560 Haverford Avenue		Amount of Each Disbursement this Period 81.00 <input type="checkbox"/> Memo Item
City Philadelphia	State PA Zip Code 19151	
Purpose of Disbursement Auto Reparis		Transaction ID : SB17.11294
Candidate Name BOB BRADY FOR CONGRESS		
Office Sought: <input checked="" 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: PA District: 01		

SUBTOTAL of Disbursements This Page (optional).....	5030.00
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 42 OF 51			
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Marlyn Service Garage		Date of Disbursement
Mailing Address 6560 Haverford Avenue		M M / D D / Y Y Y Y 05 / 24 / 2016
City Philadelphia	State PA	Zip Code 19151
Purpose of Disbursement Auto Repair	Category/Type	Amount of Each Disbursement this Period 81.00
Candidate Name BOB BRADY FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: PA District: 01	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.11320

Full Name (Last, First, Middle Initial) B. Marlyn Service Garage		Date of Disbursement
Mailing Address 6560 Haverford Avenue		M M / D D / Y Y Y Y 06 / 14 / 2016
City Philadelphia	State PA	Zip Code 19151
Purpose of Disbursement Auto Repair	Category/Type	Amount of Each Disbursement this Period 108.00
Candidate Name BOB BRADY FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: PA District: 01	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.11335

Full Name (Last, First, Middle Initial) c. New Jersey EZ Pass		Date of Disbursement
Mailing Address PO Box 52003		M M / D D / Y Y Y Y 05 / 04 / 2016
City Newark	State NJ	Zip Code 07101-8203
Purpose of Disbursement Tolls	Category/Type	Amount of Each Disbursement this Period 300.00
Candidate Name BOB BRADY FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: PA District: 01	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.11307

SUBTOTAL of Disbursements This Page (optional).....	489.00
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 43 OF 51	
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. New Jersey EZ Pass		Date of Disbursement MM / DD / YYYY 06 / 10 / 2016
Mailing Address PO Box 52003		Amount of Each Disbursement this Period 300.00
City Newark	State NJ	
Zip Code 07101-8203	Purpose of Disbursement Tolls	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Category/Type	Transaction ID : SB17.11329
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

Full Name (Last, First, Middle Initial) B. OnStar		Date of Disbursement MM / DD / YYYY 05 / 21 / 2016
Mailing Address PO Box 1027		Amount of Each Disbursement this Period 75.46
City Warren	State MI	
Zip Code 48090-1027	Purpose of Disbursement Subscription	<input checked="" type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Category/Type	Transaction ID : SB17.11293
Office Sought: <input checked="" 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: PA District: 01		

Full Name (Last, First, Middle Initial) c. OnStar		Date of Disbursement MM / DD / YYYY 06 / 03 / 2016
Mailing Address PO Box 1027		Amount of Each Disbursement this Period 37.73
City Warren	State MI	
Zip Code 48090-1027	Purpose of Disbursement Subscription	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Category/Type	Transaction ID : SB17.11323
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

SUBTOTAL of Disbursements This Page (optional).....	337.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 51	
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sirius XM Satellite Radio		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2016
Mailing Address PO Box 9001399		Amount of Each Disbursement this Period 116.92 <input type="checkbox"/> Memo Item Transaction ID : SB17.11269
City Louisville	State KY	
Zip Code 40290-1399	Purpose of Disbursement Satellite Radio	Category/ Type
Candidate Name BOB BRADY FOR CONGRESS	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 01		

Full Name (Last, First, Middle Initial) B. Sirius XM Satellite Radio		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2016
Mailing Address PO Box 9001399		Amount of Each Disbursement this Period 112.76 <input type="checkbox"/> Memo Item Transaction ID : SB17.11304
City Louisville	State KY	
Zip Code 40290-1399	Purpose of Disbursement Satellite Radio	Category/ Type
Candidate Name BOB BRADY FOR CONGRESS	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 01		

Full Name (Last, First, Middle Initial) c. State Farm Insurance Co.		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2016
Mailing Address One State Farm Drive		Amount of Each Disbursement this Period 877.96 <input type="checkbox"/> Memo Item Transaction ID : SB17.11261
City Concordville	State PA	
Zip Code 19339	Purpose of Disbursement Auto Insurance	Category/ Type
Candidate Name BOB BRADY FOR CONGRESS	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 01		

SUBTOTAL of Disbursements This Page (optional).....	1107.64
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 45 OF 51			
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sunoco Service Station1		Date of Disbursement MM / DD / YYYY 04 / 29 / 2016
Mailing Address 4805 JFK Hwy I-95 (MM 83) MD-543		Amount of Each Disbursement this Period 263.70
City Aberdeen	State MD Zip Code 21001	
Purpose of Disbursement April Fuel		<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11302
Office Sought: <input checked="" 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: PA District: 01	Category/Type	

Full Name (Last, First, Middle Initial) B. Sunoco Service Station1		Date of Disbursement MM / DD / YYYY 05 / 25 / 2016
Mailing Address 4805 JFK Hwy I-95 (MM 83) MD-543		Amount of Each Disbursement this Period 405.99
City Aberdeen	State MD Zip Code 21001	
Purpose of Disbursement May Fuel		<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11309
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01	Category/Type	

Full Name (Last, First, Middle Initial) c. Sunoco Service Station1		Date of Disbursement MM / DD / YYYY 06 / 22 / 2016
Mailing Address 4805 JFK Hwy I-95 (MM 83) MD-543		Amount of Each Disbursement this Period 396.98
City Aberdeen	State MD Zip Code 21001	
Purpose of Disbursement June Fuel		<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS		Transaction ID : SB17.11328
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1066.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 51	
	<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)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Prime Rib		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2016
Mailing Address 1701 Locust Street		Amount of Each Disbursement this Period 8146.66
City Philadelphia	State PA Zip Code 19103	
Purpose of Disbursement Event	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Disbursement For: 2016	Transaction ID : SB17.11271
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2016
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 159.84
City Lehigh Valley	State PA Zip Code 18002	
Purpose of Disbursement Cellular Telephone	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Disbursement For: 2016	Transaction ID : SB17.11272
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

Full Name (Last, First, Middle Initial) c. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2016
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 157.25
City Lehigh Valley	State PA Zip Code 18002	
Purpose of Disbursement Cellular Telephone	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Disbursement For: 2016	Transaction ID : SB17.11289
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

SUBTOTAL of Disbursements This Page (optional).....	8463.75
TOTAL This Period (last page this line number only).....	38662.98

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 51	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Chester Branch NAACP		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2016
Mailing Address 511-13 Welsh Street		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Memo Item Transaction ID : SB21.11270
City Chester	State PA	
Zip Code 19013	Purpose of Disbursement Awards Dinner	Category/ Type
Candidate Name BOB BRADY FOR CONGRESS	Office Sought: <input checked="" 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: PA District: 01	

Full Name (Last, First, Middle Initial) B. Chester City Democratic Committee		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2016
Mailing Address 403 Avenue of the States		Amount of Each Disbursement this Period 10000.00 <input type="checkbox"/> Memo Item Transaction ID : SB21.11247
City Chester	State PA	
Zip Code 19013	Purpose of Disbursement Contribution	Category/ Type
Candidate Name BOB BRADY FOR CONGRESS	Office Sought: <input checked="" 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: PA District: 01	

Full Name (Last, First, Middle Initial) C. Delaware County Democratic Committee		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2016
Mailing Address PO Box 473		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item Transaction ID : SB21.11249
City Media	State PA	
Zip Code 19063	Purpose of Disbursement Contribution	Category/ Type
Candidate Name BOB BRADY FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PA District: 01	

SUBTOTAL of Disbursements This Page (optional).....	11500.00
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 48 OF 51
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DONALD NORCROSS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016
Mailing Address PO BOX 160		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Memo Item Transaction ID : SB21.11262
City COLLINGSWOOD	State NJ	
Zip Code 08108	Purpose of Disbursement Contribution	Category/ Type
Candidate Name BOB BRADY FOR CONGRESS	Office Sought: <input checked="" 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: PA District: 01	

Full Name (Last, First, Middle Initial) B. Father's Day Rally		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2016
Mailing Address 1243 W. 65th Street		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Memo Item Transaction ID : SB21.11252
City Philadelphia	State PA	
Zip Code 19126	Purpose of Disbursement Contribution	Category/ Type
Candidate Name BOB BRADY FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PA District: 01	

Full Name (Last, First, Middle Initial) c. Mother of Devine Grace Church		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2016
Mailing Address 2918 East Thompson Street		Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Memo Item Transaction ID : SB21.11279
City Philadelphia	State PA	
Zip Code 19134	Purpose of Disbursement Ad / Banner	Category/ Type
Candidate Name BOB BRADY FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PA District: 01	

SUBTOTAL of Disbursements This Page (optional).....	2800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 51
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PNC Bank		Date of Disbursement MM / DD / YYYY 05 / 02 / 2016
Mailing Address PO Box 535230		Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Memo Item Transaction ID : SB21.11241
City Pittsburgh	State PA	
Zip Code 15253	Purpose of Disbursement MM Service Charge	Category/ Type
Candidate Name BOB BRADY FOR CONGRESS	Office Sought: <input checked="" 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: PA District: 01	

Full Name (Last, First, Middle Initial) B. PNC Bank		Date of Disbursement MM / DD / YYYY 05 / 02 / 2016
Mailing Address PO Box 535230		Amount of Each Disbursement this Period 150.00 <input type="checkbox"/> Memo Item Transaction ID : SB21.11303
City Pittsburgh	State PA	
Zip Code 15253	Purpose of Disbursement Service Charge	Category/ Type
Candidate Name BOB BRADY FOR CONGRESS	Office Sought: <input checked="" 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: PA District: 01	

Full Name (Last, First, Middle Initial) c. PNC Bank		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016
Mailing Address PO Box 535230		Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Memo Item Transaction ID : SB21.11242
City Pittsburgh	State PA	
Zip Code 15253	Purpose of Disbursement MM Service Charge	Category/ Type
Candidate Name BOB BRADY FOR CONGRESS	Office Sought: <input checked="" 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: PA District: 01	

SUBTOTAL of Disbursements This Page (optional).....	170.00
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 50 OF 51
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BOB BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2016
Mailing Address PO Box 535230		Amount of Each Disbursement this Period 50.00
City Pittsburgh	State PA	
Zip Code 15253	Purpose of Disbursement Service Charge	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Category/ Type	Transaction ID : SB21.11321
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

Full Name (Last, First, Middle Initial) B. SANTARSIERO FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2016
Mailing Address PO BOX 249		Amount of Each Disbursement this Period 2000.00
City NEWTOWN	State PA	
Zip Code 18940	Purpose of Disbursement Contribution	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Category/ Type	Transaction ID : SB21.11254
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

Full Name (Last, First, Middle Initial) c. Taking Care of Our Own		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2016
Mailing Address Info requested		Amount of Each Disbursement this Period 500.00
City Philadelphia	State PA	
Zip Code 12345	Purpose of Disbursement Contribution	<input type="checkbox"/> Memo Item
Candidate Name BOB BRADY FOR CONGRESS	Category/ Type	Transaction ID : SB21.11250
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 01		

SUBTOTAL of Disbursements This Page (optional).....	2550.00
TOTAL This Period (last page this line number only).....	17020.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

BOB BRADY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Democratic Campaign Committee of Philadelphia		Nature of Debt (Purpose): Loan
Mailing Address 1421 Walnut Street		
City State Zip Code Philadelphia PA 19102		

Outstanding Balance Beginning This Period 5000.00	Transaction ID : SD9.4599	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period	Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period	Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period	

1) SUBTOTALS This Period This Page (optional)	5000.00
2) TOTALS This Period (last page this line number only)	5000.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	5000.00