

**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

Stephen Lynch for Congress

ADDRESS (number and street)

169 W 8th St



Check if different than previously reported. (ACC)

South Boston

MA

02127

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00366948

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

MA

08

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y  
09 / 03 / 2024

in the State of

MA

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
07 / 01 / 2024

through

M M / D D / Y Y Y Y  
08 / 14 / 2024

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 Conroy, Nancy, , ,

Signature of Treasurer

Conroy, Nancy, , ,

Date

M M / D D / Y Y Y Y  
08 / 22 / 2024

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

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

SUMMARY PAGE  
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Stephen Lynch for Congress

Report Covering the Period: From: 07 / 01 / 2024 To: 08 / 14 / 2024

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ....                                             | 27340.00                | 600461.06                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 27340.00                | 600461.06                          |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 32276.12                | 716858.68                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 0.00                    | 200.00                             |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 32276.12                | 716658.68                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 1086009.95              |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 1750.00                 |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                    |

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Stephen Lynch for Congress

Report Covering the Period:

From:

M

M

/

D

D

/

Y

Y

Y

Y

07

01

2024

To:

M

M

/

D

D

/

Y

Y

Y

Y

08

14

2024

| I. RECEIPTS                                                                                       | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|---------------------------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM:                                                        |                               |                                    |
| (a) Individuals/Persons Other Than Political Committees                                           |                               |                                    |
| (i) Itemized (use Schedule A).....                                                                | 1100.00                       | 295350.00                          |
| (ii) Unitemized .....                                                                             | 240.00                        | 3111.06                            |
| (iii) TOTAL of contributions from individuals .....                                               | 1340.00                       | 298461.06                          |
| (b) Political Party Committees.....                                                               | 0.00                          | 0.00                               |
| (c) Other Political Committees (such as PACs) .....                                               | 26000.00                      | 302000.00                          |
| (d) The Candidate .....                                                                           | 0.00                          | 0.00                               |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..            | 27340.00                      | 600461.06                          |
| 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                          | 200.00                             |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) .....                                              | 3089.13                       | 13816.92                           |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... | 30429.13                      | 614477.98                          |

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

**II. DISBURSEMENTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

32276.12

716858.68

18. TRANSFERS TO OTHER  
AUTHORIZED COMMITTEES .....

0.00

0.00

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed  
by the Candidate.....

0.00

0.00

(b) Of All Other Loans .....

0.00

0.00

(c) TOTAL LOAN REPAYMENTS  
(add Lines 19(a) and (b)).....

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other  
Than Political Committees .....

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACs) .....

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS  
(add Lines 20(a), (b), and (c)).....

0.00

0.00

21. OTHER DISBURSEMENTS .....

0.00

115000.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

32276.12

831858.68

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

1087856.94

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

30429.13

25. SUBTOTAL (add Line 23 and Line 24).....

1118286.07

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

32276.12

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

1086009.95

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

Mitchell, John, , ,

A.

Mailing Address 8 Little Boot Ln

City

Westwood

State

MA

Zip Code

02090-2648

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Audax PE

Occupation

Investor

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 4 |   | 2 | 0 | 2 | 4 |

Transaction ID : 11496309

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* Earmarked Contribution: See Below

B.

Full Name (Last, First, Middle Initial)

ActBlue Technical Services

Mailing Address 366 Summer St

City

Somerville

State

MA

Zip Code

02144-3132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1340.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 4 |   | 2 | 0 | 2 | 4 |

Transaction ID : 11496309E

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

C.

Full Name (Last, First, Middle Initial)

Williams, Tim, , ,

Mailing Address 45 Adrian Way

City

Barnstable

State

MA

Zip Code

02630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tim Williams

Occupation

Builder

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 9 |   | 2 | 0 | 2 | 4 |

Transaction ID : 11338615

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

1100.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

Air Line Pilots Assoc. Int'l PAC

Mailing Address 1625 Massachusetts Ave NW

City  
WashingtonState  
DCZip Code  
20036-2212FEC ID number of contributing  
federal political committee.

C C00035451

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 06 2024

Transaction ID : 11446419

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN PODIATRIC MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 11400 Rockville Pike  
Ste 220City  
RockvilleState  
MDZip Code  
20852-3004FEC ID number of contributing  
federal political committee.

C C00008839

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2024

Transaction ID : 11393374

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DELTA AIR LINES POLITICAL ACTION COMMITTEE

Mailing Address 1212 New York Ave NW  
Ste 200City  
WashingtonState  
DCZip Code  
20005-6609FEC ID number of contributing  
federal political committee.

C C00104802

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2024

Transaction ID : 11393444

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

8500.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

DRIVE POLITICAL FUND PAC

Mailing Address 25 Louisiana Ave NW

City

Washington

State

DC

Zip Code

20001-2130

FEC ID number of contributing  
federal political committee.

C C00032979

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2024

Transaction ID : 11393451

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 1000 Wilson Blvd

City

Arlington

State

VA

Zip Code

22209-3927

FEC ID number of contributing  
federal political committee.

C C00005249

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 14 2024

Transaction ID : 11514587

Amount of Each Receipt this Period

5000.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

Democracy Engine

Mailing Address 850 Quincy St NW  
Apt 402

City

Washington

State

DC

Zip Code

20011-5873

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 14 2024

Transaction ID : 11514587E

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

10000.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF LETTER CARRIERS OF U.S.A. POLITICAL FUND (LETTER CARRIER POLITICAL

**A.** Mailing Address 100 Indiana Ave NWCity  
WashingtonState  
DCZip Code  
20001-2143FEC ID number of contributing  
federal political committee.

C C00023580

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 12 2024

Transaction ID : 11481368

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

**B.** Mailing Address 1101 King St  
Ste 600City  
AlexandriaState  
VAZip Code  
22314-2965FEC ID number of contributing  
federal political committee.

C C00144766

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 31 2024

Transaction ID : 11393439

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** 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

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

7500.00

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

26000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)  
Citizens Bank

A. Mailing Address PO Box 789

City  
ProvidenceState  
RIZip Code  
02901-0789

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 1 |   | 2 | 0 | 2 | 4 |

Transaction ID : 11493039

FEC ID number of contributing  
federal political committee.

C

Amount of Each Receipt this Period

3089.13

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13816.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC ID number of contributing  
federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC ID number of contributing  
federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

☐ Memo Item

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

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

|         |
|---------|
| 3089.13 |
| 3089.13 |

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 7 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.40

Transaction ID : 501190446

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

7.32

Transaction ID : 501190447

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.34

Transaction ID : 501190448

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

13.06

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
credit card processing fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

39.90

Transaction ID : 501190644

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1270

City  
NewarkState  
NJZip Code  
07101-1270Purpose of Disbursement  
credit card payment

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3577.32

Transaction ID : 501175075

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon Marketplace**Mailing Address 1200 12th Ave S  
Ste 1200City  
SeattleState  
WAZip Code  
98144-2734Purpose of Disbursement  
Supplies

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 3 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

129.50

Transaction ID : 501175086

☒ Memo Item \***SUBTOTAL** of Disbursements This Page (optional).....▶

3617.22

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Anton's**

Mailing Address 116 W Broadway

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 4 |   | 2 | 0 | 2 | 4 |

City  
BostonState  
MAZip Code  
02127-1072

FEC Identification Number

C

Purpose of Disbursement  
Event expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

113.50

Transaction ID : 501175091

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Boston Globe**

Mailing Address PO Box 55819

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 6 |   | 2 | 0 | 2 | 4 |

City  
BostonState  
MAZip Code  
02205-5819

FEC Identification Number

C

Purpose of Disbursement  
Subscription

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

168.00

Transaction ID : 501175093

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Castle Self Storage**

Mailing Address 39 Old Colony Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

City  
South BostonState  
MAZip Code  
02127-2404

FEC Identification Number

C

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

433.00

Transaction ID : 501175088

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Speedway**

Mailing Address 874 Dorchester Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 1 |   | 2 | 0 | 2 | 4 |

City  
BostonState  
MAZip Code  
02125-1117

FEC Identification Number

C

Purpose of Disbursement  
Auto expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

74.17

Transaction ID : 501175085

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Speedway**

Mailing Address 874 Dorchester Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 6 |   | 2 | 0 | 2 | 4 |

City  
BostonState  
MAZip Code  
02125-1117

FEC Identification Number

C

Purpose of Disbursement  
Auto expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

78.00

Transaction ID : 501175092

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. US House of Representatives**

Mailing Address US CAPITOL

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 7 |   | 2 | 0 | 2 | 4 |

City  
WashingtonState  
DCZip Code  
20001

FEC Identification Number

C

Purpose of Disbursement  
Gifts for Service members and constituents

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

540.60

Transaction ID : 501175083

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Washington Nationals**

Mailing Address 1500 S Capitol St SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 3 |   | 2 | 0 | 2 | 4 |

City  
WashingtonState  
DCZip Code  
20003-3599

FEC Identification Number

C

Purpose of Disbursement  
Catering

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

55.00

Transaction ID : 501175090

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1270

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 0 |   | 2 | 0 | 2 | 4 |

City  
NewarkState  
NJZip Code  
07101-1270

FEC Identification Number

C

Purpose of Disbursement  
credit card payment

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4668.10

Transaction ID : 501187032

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Amazon Marketplace**Mailing Address 1200 12th Ave S  
Ste 1200

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 4 |   | 2 | 0 | 2 | 4 |

City  
SeattleState  
WAZip Code  
98144-2734

FEC Identification Number

C

Purpose of Disbursement  
Supplies

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

55.23

Transaction ID : 501187042

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

4668.10

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Amazon Marketplace**Mailing Address 1200 12th Ave S  
Ste 1200City  
SeattleState  
WAZip Code  
98144-2734Purpose of Disbursement  
Supplies

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

63.74

Transaction ID : 501187043

☒ Memo Item \***B. Amazon Marketplace**Mailing Address 1200 12th Ave S  
Ste 1200City  
SeattleState  
WAZip Code  
98144-2734Purpose of Disbursement  
Supplies

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

63.74

Transaction ID : 501187044

☒ Memo Item \***C. Anton's**

Mailing Address 116 W Broadway

City  
BostonState  
MAZip Code  
02127-1072Purpose of Disbursement  
Event expense

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

113.50

Transaction ID : 501187045

☒ Memo Item \***SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Boston Globe**

Mailing Address PO Box 55819

City  
BostonState  
MAZip Code  
02205-5819Purpose of Disbursement  
Subscription

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 3 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

168.00

Transaction ID : 501187052

☒ Memo Item \***B. Castle Self Storage**

Mailing Address 39 Old Colony Ave

City  
South BostonState  
MAZip Code  
02127-2404Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

433.00

Transaction ID : 501187050

☒ Memo Item \***C. Google.Inc.**

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain ViewState  
CAZip Code  
94043-1351Purpose of Disbursement  
Google suite subscription

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

38.25

Transaction ID : 501187048

☒ Memo Item \***SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. La Paloma**

Mailing Address 195 Newport Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 8 |   | 2 | 0 | 2 | 4 |

City  
QuincyState  
MAZip Code  
02170-1761

FEC Identification Number

C

Purpose of Disbursement  
Meetings

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

193.34

Transaction ID : 501187047

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Michael's 9882**

Mailing Address 140 Ivory St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 1 |   | 2 | 0 | 2 | 4 |

City  
BraintreeState  
MAZip Code  
02184-7140

FEC Identification Number

C

Purpose of Disbursement  
Supplies

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

137.83

Transaction ID : 501187056

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Savr**

Mailing Address 150 Seaport Blvd

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 8 |   | 2 | 0 | 2 | 4 |

City  
BostonState  
MAZip Code  
02210-2085

FEC Identification Number

C

Purpose of Disbursement  
Meetings

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.01

Transaction ID : 501187036

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Speedway**

Mailing Address 874 Dorchester Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 0 |   | 2 | 0 | 2 | 4 |

City  
BostonState  
MAZip Code  
02125-1117

FEC Identification Number

C

Purpose of Disbursement  
Auto expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

74.86

Transaction ID : 501187037

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Speedway**

Mailing Address 874 Dorchester Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 0 |   | 2 | 0 | 2 | 4 |

City  
BostonState  
MAZip Code  
02125-1117

FEC Identification Number

C

Purpose of Disbursement  
Auto expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

74.04

Transaction ID : 501187038

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Speedway**

Mailing Address 874 Dorchester Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 3 |   | 2 | 0 | 2 | 4 |

City  
BostonState  
MAZip Code  
02125-1117

FEC Identification Number

C

Purpose of Disbursement  
Auto expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

72.96

Transaction ID : 501187053

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Speedway**

Mailing Address 874 Dorchester Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 8 |   | 2 | 0 | 2 | 4 |

City  
BostonState  
MAZip Code  
02125-1117

FEC Identification Number

C

Purpose of Disbursement  
Auto expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

81.38

Transaction ID : 501187054

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Stapleton Floral**

Mailing Address 635 E Broadway

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 7 |   | 2 | 0 | 2 | 4 |

City  
South BostonState  
MAZip Code  
02127-1503

FEC Identification Number

C

Purpose of Disbursement  
Flowers

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

285.63

Transaction ID : 501187035

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Stapleton Floral**

Mailing Address 635 E Broadway

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 1 |   | 2 | 0 | 2 | 4 |

City  
South BostonState  
MAZip Code  
02127-1503

FEC Identification Number

C

Purpose of Disbursement  
Flowers

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

275.63

Transaction ID : 501187039

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Stapleton Floral**

Mailing Address 635 E Broadway

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 1 |   | 2 | 0 | 2 | 4 |

City  
South BostonState  
MAZip Code  
02127-1503

FEC Identification Number

C

Purpose of Disbursement  
Flowers

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

200.63

Transaction ID : 501187040

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. The Red House Restaurant**

Mailing Address 98 Winthrop St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 2 | 4 |

City  
CambridgeState  
MAZip Code  
02138-4930

FEC Identification Number

C

Purpose of Disbursement  
Meetings

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

370.21

Transaction ID : 501187041

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. US Capitol Visitor Center**

Mailing Address 1ST St SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 2 | 4 |

City  
WashingtonState  
DCZip Code  
20515-0001

FEC Identification Number

C

Purpose of Disbursement  
Gifts for Service members and constituents

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

683.00

Transaction ID : 501187051

☒ Memo Item \*

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. US House of Representatives**

Mailing Address US CAPITOL

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 26  |   | 2024    |

City  
WashingtonState  
DCZip Code  
20001

FEC Identification Number

C

Purpose of Disbursement  
Gifts for Service members and constituents

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

182.85

Transaction ID : 501187046

☒ Memo Item \*

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. US House of Representatives**

Mailing Address US CAPITOL

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 01  |   | 2024    |

City  
WashingtonState  
DCZip Code  
20001

FEC Identification Number

C

Purpose of Disbursement  
Gifts for Service members and constituents

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

195.50

Transaction ID : 501187049

☒ Memo Item \*

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. US House of Representatives**

Mailing Address US CAPITOL

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 11  |   | 2024    |

City  
WashingtonState  
DCZip Code  
20001

FEC Identification Number

C

Purpose of Disbursement  
Gifts for Service members and constituents

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

336.00

Transaction ID : 501187057

☒ Memo Item \*

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Boyds Direct**

Mailing Address 17 A Gill St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 24  |   | 2024    |

City  
WoburnState  
MAZip Code  
01801-1788

FEC Identification Number

C

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

610.94

Transaction ID : 501190449

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Chick Montana Group**

Mailing Address 202 Bonham Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 01  |   | 2024    |

City  
DedhamState  
MAZip Code  
02026-5404

FEC Identification Number

C

Purpose of Disbursement  
Postage and delivery expense

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4.43

Transaction ID : 501190451

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Chick Montana Group**

Mailing Address 202 Bonham Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 01  |   | 2024    |

City  
DedhamState  
MAZip Code  
02026-5404

FEC Identification Number

C

Purpose of Disbursement  
Accounting and compliance services

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3000.00

Transaction ID : 501190452

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

3615.37

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Chick Montana Group**

Mailing Address 202 Bonham Rd

City  
DedhamState  
MAZip Code  
02026-5404Purpose of Disbursement  
Postage and delivery expense

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3.05

Transaction ID : 501190453

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Chick Montana Group**

Mailing Address 202 Bonham Rd

City  
DedhamState  
MAZip Code  
02026-5404Purpose of Disbursement  
Accounting and compliance services

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : 501190454

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Chris Trull**Mailing Address 70 I St SE  
Apt 426City  
WashingtonState  
DCZip Code  
20003-4815Purpose of Disbursement  
Fundraising consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : 501190455

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6503.05

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Chris Trull**Mailing Address 70 I St SE  
Apt 426City  
WashingtonState  
DCZip Code  
20003-4815Purpose of Disbursement  
Meetings

Candidate Name

Office Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

187.86

Transaction ID : 501190456

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Chris Trull**Mailing Address 70 I St SE  
Apt 426City  
WashingtonState  
DCZip Code  
20003-4815Purpose of Disbursement  
Ground transportation

Candidate Name

Office Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

36.21

Transaction ID : 501190457

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CinCon Group**

Mailing Address 23 Cresthill Rd

City  
BrightonState  
MAZip Code  
02135-1826Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : 501190458

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2224.07

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. CinCon Group**

Mailing Address 23 Cresthill Rd

City  
BrightonState  
MAZip Code  
02135-1826Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : 501190459

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CinCon Group**

Mailing Address 23 Cresthill Rd

City  
BrightonState  
MAZip Code  
02135-1826Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : 501190460

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CinCon Group**

Mailing Address 23 Cresthill Rd

City  
BrightonState  
MAZip Code  
02135-1826Purpose of Disbursement  
Caucus supplies

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

800.00

Transaction ID : 501190461

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4800.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Commonwealth of Massachusetts**

Mailing Address PO Box 847840

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 4 |   | 2 | 0 | 2 | 4 |

City  
BostonState  
MAZip Code  
02284-7840

FEC Identification Number

C

Purpose of Disbursement  
Tolls

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

45.40

Transaction ID : 501190462

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. First Bank Merchant Service Fee**

Mailing Address 1 Western Maryland Pkwy

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 3 |   | 2 | 0 | 2 | 4 |

City  
HagerstownState  
MDZip Code  
21740-5146

FEC Identification Number

C

Purpose of Disbursement  
credit card processing fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

54.95

Transaction ID : 501190463

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. First Bank Merchant Service Fee**

Mailing Address 1 Western Maryland Pkwy

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 3 |   | 2 | 0 | 2 | 4 |

City  
HagerstownState  
MDZip Code  
21740-5146

FEC Identification Number

C

Purpose of Disbursement  
credit card processing fee

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

19.95

Transaction ID : 501190464

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

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

120.30

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Frst Bnk Mrch Svc**

Mailing Address 1 Western Maryland Pkwy

City  
HagerstownState  
MDZip Code  
21740-5146Purpose of Disbursement  
credit card processing fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

54.95

Transaction ID : 501190465

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Frst Bnk Mrch Svc**

Mailing Address 1 Western Maryland Pkwy

City  
HagerstownState  
MDZip Code  
21740-5146Purpose of Disbursement  
credit card processing fee

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

19.95

Transaction ID : 501190466

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KC Strategies**

Mailing Address 4 Charlotte Dr

City  
AndoverState  
MAZip Code  
01810-6002Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5500.00

Transaction ID : 501190467

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5574.90

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Nicholas Zaferakis, Jr.**Mailing Address 824 E 3rd St  
Apt 2City  
South BostonState  
MAZip Code  
02127-2359Purpose of Disbursement  
Travel reimbursement

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

303.99

Transaction ID : 501190468

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Saint Anthony's Feast**

Mailing Address 201 -203 ENDICOTT St

City  
BostonState  
MAZip Code  
02113Purpose of Disbursement  
Charitable contribution

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 6 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : 501190469

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address PO Box 15062

City  
AlbanyState  
NYZip Code  
12212-5062Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

193.80

Transaction ID : 501190472

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

747.79

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 32

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

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NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address PO Box 15062

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 06  |   | 2024    |

City  
AlbanyState  
NYZip Code  
12212-5062

FEC Identification Number

C

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

192.26

Transaction ID : 501190473

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|     |   |     |   |         |

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                                  |
|--------------------------|-------------------|----------------------------------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|     |   |     |   |         |

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                                  |
|--------------------------|-------------------|----------------------------------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                  |

State:

District:

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

192.26

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

32076.12

# SCHEDULE D (FEC Form 3)

## DEBTS AND OBLIGATIONS

### Excluding Loans

(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 32 OF 32

FOR LINE NUMBER:  
(check only one)

☒ 9  
☐ 10

NAME OF COMMITTEE (In Full)

Stephen Lynch for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Verizon Political Accounts

Nature of Debt (Purpose):

Deposit

Mailing Address 5 Davis Farm Rd

City  
Portland

State  
ME

Zip Code  
04103-1669

Outstanding Balance Beginning This Period

1400.00

Transaction ID : 1250000428

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1400.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Verizon Political Accounts

Nature of Debt (Purpose):

Deposit

Mailing Address 5 Davis Farm Rd

City  
Portland

State  
ME

Zip Code  
04103-1669

Outstanding Balance Beginning This Period

350.00

Transaction ID : 1250000427

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

350.00

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

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

1750.00

2) **TOTALS** This Period (last page this line number only) ▶

1750.00

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) ▶

1750.00