

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
Phillips For Congress

ADDRESS (number and street) 3523 Phyllis Street
 Check if different than previously reported. (ACC) Endicott NY 13760

2. **FEC IDENTIFICATION NUMBER** ▼ C C00600833 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
NY 22

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 06 / 28 / 2016 in the State of NY
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 04 / 01 / 2016 through 06 / 08 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Daniel Brhel
Signature of Treasurer Daniel Brhel *[Electronically Filed]* Date 06 / 16 / 2016

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Phillips For Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	66954.79	219417.29
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	66954.79	219417.29
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	87694.66	118691.49
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	87694.66	118691.49
8. Cash on Hand at Close of Reporting Period (from Line 27).....	104591.80	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Phillips For Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2016 To: M M / D D / Y Y Y Y 06 / 08 / 2016

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	55935.79	189362.29
(ii) Unitemized	8519.00	26545.00
(iii) TOTAL of contributions from individuals	64454.79	215907.29
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	3500.00
(d) The Candidate	0.00	10.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	66954.79	219417.29
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	1000.00	4950.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	67954.79	224367.29

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	87694.66	118691.49
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	130.00	634.00
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	200.00	450.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	88024.66	119775.49

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	124661.67
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	67954.79
25. SUBTOTAL (add Line 23 and Line 24).....	192616.46
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	88024.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	104591.80

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mark J Miciotto

Mailing Address 628 Stoner Avenue

City Shreveport State LA Zip Code 71101

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

Name of Employer Law office of Mark J Miciotto Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 01 / 2016

Transaction ID : A-464

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 97 Patton Rd

City Newburgh State NY Zip Code 12550

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

Name of Employer Glenmark Pharmaceuticals Occupation Administrative Assistant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 02 / 2016

Transaction ID : A-457

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 470 South Union Street

City Alexandria State VA Zip Code 22314

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

Name of Employer Heritage Foundation Occupation Founder

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 02 / 2016

Transaction ID : A-612

Amount of Each Receipt this Period
250.00

Memo Item

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Gallagher & Tomkins PC

Mailing Address **PO Box 2429**

City **Binghamton** State **NY** Zip Code **13902**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 02 / 2016

Transaction ID : A-615

Amount of Each Receipt this Period
750.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mr. Keith Libolt

Mailing Address **111 Climbing Ridge Road**

City **New Paltz** State **NY** Zip Code **12561**

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

Name of Employer Occupation
Affordable Housing Concepts **Owner**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 02 / 2016

Transaction ID : A-603

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address **76 Frederick Street**

City **Binghamton** State **NY** Zip Code **13901**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 02 / 2016

Transaction ID : A-616

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

4450.00

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

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

FOR LINE NUMBER: PAGE 7 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Mark D. Rodgers

Mailing Address 6052 Ridge Ford Drive

City State Zip Code
Burke VA 22015

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

Name of Employer Occupation
The Clapham Group Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2016

Transaction ID : A-614

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mr. Andrew Napoli

Mailing Address 6116 Hibbling Ave

City State Zip Code
Springfield VA 22150-3327

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

Name of Employer Occupation
Assistant Secretary of the Army Legislative Liaison

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 07 / 2016

Transaction ID : A-611

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mr. Joseph O'Neill

Mailing Address 5 Weeping Willow Lane

City State Zip Code
Midland TX 79705

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

Name of Employer Occupation
O'Neill Properties President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 07 / 2016

Transaction ID : A-680

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

1700.00

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

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

FOR LINE NUMBER: PAGE 8 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Dr. John S. Perry

Mailing Address 1113 Michael Drive

City State Zip Code
Endwell NY 13760

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

Name of Employer Occupation
Endwell Family Physician Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2016

Transaction ID : A-613

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 12 Crestmont Street

City State Zip Code
Binghamton NY 13905

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

Name of Employer Occupation
Lourdes Hospital Foundation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016

Transaction ID : A-598

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mr. True Wells

Mailing Address 2908 Twilight Dr

City State Zip Code
Endicott NY 13760

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : A-685

Amount of Each Receipt this Period
100.00

Memo Item

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Phillips For Congress

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

Mailing Address 9 Edgebrook Rd

City Binghamton State NY Zip Code 13903

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 26 / 2016

Transaction ID : A-684

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 205 Kensington Rd

City Lynbrook State NY Zip Code 11563

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

Name of Employer CNA Financial Corporation Occupation Commercial Underwriting Officer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 28 / 2016

Transaction ID : A-634

Amount of Each Receipt this Period
150.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mr. Timothy J. Healy

Mailing Address 1200 5th Avenue

City New York State NY Zip Code 10029

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

Name of Employer The Healy Group LLC Occupation CIO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 28 / 2016

Transaction ID : A-636

Amount of Each Receipt this Period
500.00

Memo Item

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Phillips For Congress

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

Mailing Address 217 Colonial Avenue

City Union State NJ Zip Code 07083

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

Name of Employer US Dept of Veterans Affairs Occupation Director Employee Training

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt **04 / 28 / 2016**

Transaction ID : A-638

Amount of Each Receipt this Period **100.00**

Memo Item

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

Mailing Address 335 Ridgewood Avenue Apt 2K

City Glen Ridge State NJ Zip Code 07028

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt **04 / 28 / 2016**

Transaction ID : A-632

Amount of Each Receipt this Period **500.00**

Memo Item

C. Full Name (Last, First, Middle Initial)
Hon. Bruce Gelb

Mailing Address 1060 5th Avenue # 10B

City New York State NY Zip Code 10128-0104

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **05 / 02 / 2016**

Transaction ID : A-629

Amount of Each Receipt this Period **1000.00**

Memo Item

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

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

1600.00

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

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

FOR LINE NUMBER: PAGE 11 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

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

Mailing Address 137 Powers Road

City Binghamton State NY Zip Code 13903

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : A-628

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 16 Mercer Street

City New York State NY Zip Code 10013

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

Name of Employer Madison Equities Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2016

Transaction ID : A-631

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Dr. Emmanuel M. Guizano

Mailing Address 25 Mountain Brook Drive

City Vestal State NY Zip Code 13850

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

Name of Employer Wilson Medical Center Occupation Internalist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : A-717

Amount of Each Receipt this Period
200.00

Memo Item

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Phillips For Congress

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

Mailing Address 817 5th Avenue

City State Zip Code
New York NY 10065

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

Name of Employer Occupation
Red Apple Group CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 06 / 2016

Transaction ID : A-720

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mr. R. Martin Hanafin

Mailing Address 204 Southwood Dr

City State Zip Code
Vestal NY 13850

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : A-718

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 16 Springtree Boulevard

City State Zip Code
Apalachin NY 13732

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

Name of Employer Occupation
Lalor Dental Dentist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : A-678

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

5900.00

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

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

FOR LINE NUMBER: PAGE 13 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mr. R.T. Warner

Mailing Address 18 South Nanticoke Ave

City State Zip Code
Endicott NY 13760

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2016

Transaction ID : A-742

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 1350 W Kennicott Drive

City State Zip Code
Lake Forest IL 60045-1552

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

Name of Employer Occupation
Crealta Pharmaceuticals LLC CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2016

Transaction ID : A-740

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mr. Roy Park

Mailing Address 1 Hampton Hill Lane

City State Zip Code
Ithaca NY 14850

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

Name of Employer Occupation
Park Outdoor Advertising Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2016

Transaction ID : A-738

Amount of Each Receipt this Period
 200.00

Memo Item

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

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

1700.00

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

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

FOR LINE NUMBER: PAGE 14 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Mary Ellen Salanger

Mailing Address 805 River Rd

City Binghamton State NY Zip Code 13901-1353

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

Name of Employer None Occupation Home Maker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 12 / 2016

Transaction ID : A-746

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mr. Bruce Boyea

Mailing Address PO Box 1625

City Binghamton State NY Zip Code 13902-1625

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

Name of Employer Security Mutual Life Insurance Company Occupation Officer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 13 / 2016

Transaction ID : A-744

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mr. Marvin L Fisher II

Mailing Address 91 N. Main St

City Spencer State NY Zip Code 14883

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

Name of Employer TSB Services Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 13 / 2016

Transaction ID : A-741

Amount of Each Receipt this Period
250.00

Memo Item

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 15 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Rev Allen Martin

Mailing Address 10095 Lawyers Road

City Vienna State VA Zip Code 22181

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

Name of Employer The Livingston Group Occupation Trustee

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2016

Transaction ID : A-766

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 27 Thistlewood Drive

City Binghamton State NY Zip Code 13903

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

Name of Employer Mirabito Holdings Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2016

Transaction ID : A-743

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mr. Frank Richardson

Mailing Address 19 E 72nd Street

City New York State NY Zip Code 10021-4145

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

Name of Employer Frank E. Richardson & Co. Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2016

Transaction ID : A-767

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

3200.00

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

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

FOR LINE NUMBER: PAGE 16 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Margaret Savercool

Mailing Address 3605 Camp Mineola Road

City State Zip Code
Mattituck NY 11952

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

Name of Employer Occupation
Home Maker Home Maker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2016

Transaction ID : A-768

Amount of Each Receipt this Period
 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mr. Brock Bierman

Mailing Address 35086 Harry Byrd Highway

City State Zip Code
Round Hill VA 20141

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

Name of Employer Occupation
ancestry historian

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 20 / 2016

Transaction ID : A-723

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 6910 Bonheim Ct

City State Zip Code
McLean VA 22101

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

Name of Employer Occupation
CSIS Scholar

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 21 / 2016

Transaction ID : A-749

Amount of Each Receipt this Period
 250.00

Memo Item

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

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

3250.00

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

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

FOR LINE NUMBER: PAGE 17 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Brock Bierman

Mailing Address 35086 Harry Byrd Highway

City Round Hill State VA Zip Code 20141

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

Name of Employer ancestry Occupation historian

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

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

Transaction ID : A-774

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 3214 Northampton Street Northwest

City Washington State DC Zip Code 20015

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

Name of Employer ancestry Occupation Event Planning

WM Fundraising & Event Planning

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
585.79

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

Transaction ID : A-856

Amount of Each Receipt this Period
335.79

Memo Item
IN KIND: Event

C. Full Name (Last, First, Middle Initial)
Mr. Morton Blackwell

Mailing Address 3128 17th Street North

City Arlington State VA Zip Code 22201

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

Name of Employer ancestry Occupation Executive

Leadership Institute

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 27 / 2016

Transaction ID : A-775

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

3285.79

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Phillips For Congress

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

Mailing Address 4616 Gibson St

City Houston State TX Zip Code 77007

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

Name of Employer USGBC Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

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

Transaction ID : A-778

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 11 Ascot Pl

City Ithaca State NY Zip Code 14850

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

Name of Employer Park Outdoor Advertising Occupation Executive Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : A-791

Amount of Each Receipt this Period
 100.00

Memo Item

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

Mailing Address 80 Hanson Road

City Deposit State NY Zip Code 13754

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : A-800

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

850.00

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

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

FOR LINE NUMBER: PAGE 19 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Sean Fieler

Mailing Address 40 Haslet Avenue

City State Zip Code
Princeton NJ 08540

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

Name of Employer Occupation
Equinox Partners President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : A-799

Amount of Each Receipt this Period
 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ms. Barbara R Leonard

Mailing Address 5432 Hancock Hwy

City State Zip Code
Equinunk PA 18417

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

Name of Employer Occupation
Home Maker Home Maker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : A-801

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 9 Edgebrook Rd

City State Zip Code
Binghamton NY 13903

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : A-794

Amount of Each Receipt this Period
 50.00

Memo Item

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Steve Ragiel

Mailing Address 2740 Centery Dr

City State Zip Code
Houston TX 77005

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

Name of Employer Occupation
Brace Industrial Engineer and Entrepreneur

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 04 / 2016

Transaction ID : A-813

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 2709 North Somerset Street

City State Zip Code
Arlington VA 22213

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 05 / 2016

Transaction ID : A-816

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address 9703 Layminster Lane

City State Zip Code
Vienna VA 22182

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

Name of Employer Occupation
Thorn Run Partners Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : A-817

Amount of Each Receipt this Period
500.00

Memo Item

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Donald M Bishop

Mailing Address 326 Park St NE

City State Zip Code
Vienna VA 22180

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 07 / 2016

Transaction ID : A-895

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 225 Penna Ave

City State Zip Code
Binghamton NY 13903

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

Name of Employer Occupation
Self CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 07 / 2016

Transaction ID : A-900

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mrs. Diana Mercer

Mailing Address 14248 Equestrian Way

City State Zip Code
Wellington FL 33414

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 07 / 2016

Transaction ID : A-903

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

3150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Diana Mercer

Mailing Address 14248 Equestrian Way

City Wellington State FL Zip Code 33414

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 07 / 2016

Transaction ID : A-904

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 600 New York 25A

City Setauket- East Setauket State NY Zip Code 11733

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

Name of Employer Renaissance Technologies Occupation Financial Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 07 / 2016

Transaction ID : A-901

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 600 New York 25A

City Setauket- East Setauket State NY Zip Code 11733

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

Name of Employer Renaissance Technologies Occupation Financial Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 07 / 2016

Transaction ID : A-902

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

8100.00

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

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

FOR LINE NUMBER: PAGE 23 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Eugene Blabey

Mailing Address 9 Lena Road

City Forestburgh State NY Zip Code 12777-6204

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

Name of Employer Livonia, Avon & Lakeville Railroad Occupation President & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2016

Transaction ID : A-876

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Harold Fuller

Mailing Address 3615 Joel Drive

City Endicott State NY Zip Code 13760

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2016

Transaction ID : A-877

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mr. Carl Guy

Mailing Address 3624 Wildwood Drive

City Endwell State NY Zip Code 13760-1635

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

Name of Employer fahs construction group Occupation construction

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2016

Transaction ID : A-861

Amount of Each Receipt this Period
100.00

Memo Item

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mr. R. Martin Hanafin

Mailing Address 204 Southwood Dr

City Vestal State NY Zip Code 13850

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2016

Transaction ID : A-874

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 125 Quassaick Ave

City New Windsor State NY Zip Code 12553-6635

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

Name of Employer None Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2016

Transaction ID : A-871

Amount of Each Receipt this Period
450.00

Memo Item

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

Mailing Address 19 Rivers Edge

City Newburgh State NY Zip Code 12550

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

Name of Employer Regal Bag Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2016

Transaction ID : A-873

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1450.00

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

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

FOR LINE NUMBER: PAGE 25 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Robert L Livingston

Mailing Address 7703 Northdown Road

City State Zip Code
Alexandria VA 22308

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

Name of Employer Occupation
Livingston Group Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 08 / 2016

Transaction ID : A-852

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 198 Pleasant Hill Road

City State Zip Code
Port Crane NY 13833

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 08 / 2016

Transaction ID : A-866

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mrs. Paula McInerney

Mailing Address 2 Manitou Court

City State Zip Code
Westport CT 06880

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 08 / 2016

Transaction ID : A-854

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 26 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

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

Mailing Address 2 Manitou Court

City State Zip Code
Westport CT 06880

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

Name of Employer Occupation
Bluff Point Association Investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2016

Transaction ID : A-853

Amount of Each Receipt this Period
 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Jeff Munk

Mailing Address 4920 Upton St NW

City State Zip Code
Washington DC 20016-2350

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

Name of Employer Occupation
Baker Botts LLP Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2016

Transaction ID : A-851

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

2950.00

55935.79

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

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

FOR LINE NUMBER: PAGE 27 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

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

Mailing Address PO Box 3883

City Philadelphia State PA Zip Code 19146

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2016

Transaction ID : A-747

Amount of Each Receipt this Period
 2500.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

2500.00

2500.00

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

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

FOR LINE NUMBER: PAGE 28 OF 52
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Full Name (Last, First, Middle Initial)
Maintaining All Republicans In Office

Mailing Address 8770 Southwest 72nd Street
Ste 420

City Miami State FL Zip Code 33173

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2016

Transaction ID : A-515

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

1000.00

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Integrated Solutions Political		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 4142 Adams Avenue		Amount of Each Disbursement this Period 450.00 <input type="checkbox"/> Memo Item
City San Diego State CA Zip Code 92116	Purpose of Disbursement Database 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-651
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. George K Phillips		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 3523 Phyllis St		Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Memo Item
City Endicott State NY Zip Code 13760	Purpose of Disbursement Mileage Reimbursement 002 Category/Type	
Candidate Name Mr. George K Phillips	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-624
State: NY District: 22		

Full Name (Last, First, Middle Initial) C. McLaughlin & Associates Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2016
Mailing Address 566 New York 303		Amount of Each Disbursement this Period 10000.00 <input type="checkbox"/> Memo Item
City Blauvelt State NY Zip Code 10913	Purpose of Disbursement Polling 005 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-641
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Callahan Digital Printing		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2016
Mailing Address 229 Lower Stella Ireland Road		Amount of Each Disbursement this Period 841.60
City Binghamton	State NY Zip Code 13905	
Purpose of Disbursement Office Supplies	Category/Type 006	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-596
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2016
Mailing Address 3951 Vestal Parkway East		Amount of Each Disbursement this Period 131.22
City Vestal	State NY Zip Code 13850	
Purpose of Disbursement Mailing and Postage	Category/Type 006	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-589
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. 3 West Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2016
Mailing Address 3 West 51st Street		Amount of Each Disbursement this Period 941.00
City New York	State NY Zip Code 10104	
Purpose of Disbursement Fundraiser	Category/Type 007	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-644
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1913.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 52			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. DoubleTree		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2016
Mailing Address 225 Water Street		Amount of Each Disbursement this Period 216.00
City Binghamton State NY Zip Code 13901	Purpose of Disbursement Event 007	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-623
State: District:		

Full Name (Last, First, Middle Initial) B. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2016
Mailing Address 3951 Vestal Parkway East		Amount of Each Disbursement this Period 35.05
City Vestal State NY Zip Code 13850	Purpose of Disbursement Mailing and Postage 006	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-642
State: District:		

Full Name (Last, First, Middle Initial) c. Matzo Electric Signs		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2016
Mailing Address 40 Homer Street		Amount of Each Disbursement this Period 6905.00
City Binghamton State NY Zip Code 13903	Purpose of Disbursement Signs 006	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-591
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7156.05
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 Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Mr. Nicholas Wan		Date of Disbursement MM / DD / YYYY 04 / 18 / 2016
Mailing Address 45 Helen Street		Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Memo Item
City Binghamton	State NY Zip Code 13905	
Purpose of Disbursement Website	Candidate Name	Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Transaction ID : B-622	

Full Name (Last, First, Middle Initial) B. Digital X-Press		Date of Disbursement MM / DD / YYYY 04 / 19 / 2016
Mailing Address 5 Sand Creek Road		Amount of Each Disbursement this Period 12085.05 <input type="checkbox"/> Memo Item
City Albany	State NY Zip Code 12205	
Purpose of Disbursement Office Supplies	Candidate Name	Category/Type 006
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Transaction ID : B-643	

Full Name (Last, First, Middle Initial) C. United States Postal Service		Date of Disbursement MM / DD / YYYY 04 / 21 / 2016
Mailing Address 200 Washington Avenue		Amount of Each Disbursement this Period 335.00 <input type="checkbox"/> Memo Item
City Endicott	State NY Zip Code 13760	
Purpose of Disbursement Postage	Candidate Name	Category/Type 006
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Transaction ID : B-593	

SUBTOTAL of Disbursements This Page (optional).....	13920.05
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 Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Callahan Digital Printing		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2016
Mailing Address 229 Lower Stella Ireland Road		Amount of Each Disbursement this Period 1296.00
City Binghamton State NY Zip Code 13905	Purpose of Disbursement Office Supplies 006	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-618
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2016
Mailing Address 200 Washington Avenue		Amount of Each Disbursement this Period 117.50
City Endicott State NY Zip Code 13760	Purpose of Disbursement Postage 006	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-592
State: District:		

Full Name (Last, First, Middle Initial) C. Mr. Dallas Fischer		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2016
Mailing Address 176 Hanson Road		Amount of Each Disbursement this Period 470.00
City Mahtomedi State MN Zip Code 55115	Purpose of Disbursement Postage 006	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-780
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1883.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Jerry's Printing		Date of Disbursement MM / DD / YYYY 04 / 26 / 2016
Mailing Address 537 Reynolds Road		Amount of Each Disbursement this Period 54.00
City Johnson City	State NY Zip Code 13790	
Purpose of Disbursement Office Supplies	Category/Type 006	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-590
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Mr. Dallas Fischer		Date of Disbursement MM / DD / YYYY 04 / 27 / 2016
Mailing Address 176 Hanson Road		Amount of Each Disbursement this Period 1778.31
City Mahtomedi	State MN Zip Code 55115	
Purpose of Disbursement Payroll	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-650
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. New York State Insurance Fund		Date of Disbursement MM / DD / YYYY 04 / 27 / 2016
Mailing Address 1 Watervliet Avenue Extension		Amount of Each Disbursement this Period 471.51
City Albany	State NY Zip Code 12206	
Purpose of Disbursement Payroll and Taxes	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-708
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2303.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Paychex INC		Date of Disbursement MM / DD / YYYY 04 / 27 / 2016
Mailing Address 215 Greenfield Parkway		Amount of Each Disbursement this Period 1029.25 <input type="checkbox"/> Memo Item Transaction ID : B-648
City Liverpool	State NY	
Zip Code 13088	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Paychex INC		Date of Disbursement MM / DD / YYYY 04 / 27 / 2016
Mailing Address 215 Greenfield Parkway		Amount of Each Disbursement this Period 114.61 <input type="checkbox"/> Memo Item Transaction ID : B-649
City Liverpool	State NY	
Zip Code 13088	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Callahan Digital Printing		Date of Disbursement MM / DD / YYYY 05 / 03 / 2016
Mailing Address 229 Lower Stella Ireland Road		Amount of Each Disbursement this Period 831.60 <input type="checkbox"/> Memo Item Transaction ID : B-617
City Binghamton	State NY	
Zip Code 13905	Purpose of Disbursement Office Supplies	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1975.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

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

Mailing Address 38 Condon Road

City Stillwater State NY Zip Code 12170

Purpose of Disbursement Fundraising Category/Type 003

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement 05 / 03 / 2016

Amount of Each Disbursement this Period 3000.00

Memo Item

Transaction ID : B-620

Full Name (Last, First, Middle Initial)
B. Executive Star Services, Inc.

Mailing Address 1 Roland Drive

City White Plains State NY Zip Code 10605

Purpose of Disbursement Office Supplies Category/Type 006

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement 05 / 03 / 2016

Amount of Each Disbursement this Period 634.68

Memo Item

Transaction ID : B-619

Full Name (Last, First, Middle Initial)
c. Integrated Solutions Political

Mailing Address 4142 Adams Avenue

City San Diego State CA Zip Code 92116

Purpose of Disbursement Fundraising Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement 05 / 04 / 2016

Amount of Each Disbursement this Period 450.00

Memo Item

Transaction ID : B-655

SUBTOTAL of Disbursements This Page (optional) 4084.68

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Mercury Public Affiars LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016	
Mailing Address 250 Greenwich Street 36th Floor			Amount of Each Disbursement this Period 1651.00	
City New York	State NY	Zip Code 10007	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Office Supplies		Category/ Type 006		
Candidate Name			Transaction ID : B-640	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. NYSEG			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2016	
Mailing Address PO Box 5240			Amount of Each Disbursement this Period 325.00	
City Binghamton	State NY	Zip Code 13902	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Utilities		Category/ Type 001		
Candidate Name			Transaction ID : B-707	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. 3 West Club			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2016	
Mailing Address 3 West 51st Street			Amount of Each Disbursement this Period 940.37	
City New York	State NY	Zip Code 10104	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Fundraiser		Category/ Type 003		
Candidate Name			Transaction ID : B-689	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2916.37
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 Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Mr. Dallas Fischer			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2016	
Mailing Address 176 Hanson Road			Amount of Each Disbursement this Period 236.97	
City Mahtomedi	State MN	Zip Code 55115	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Office Supplies Reimbursement		Category/ Type 001		
Candidate Name			Transaction ID : B-688	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Mr. Dallas Fischer			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2016	
Mailing Address 176 Hanson Road			Amount of Each Disbursement this Period 70.50	
City Mahtomedi	State MN	Zip Code 55115	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Reimbursement Postage		Category/ Type 001		
Candidate Name			Transaction ID : B-690	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. CSC Capital			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2016	
Mailing Address 38 Condon Road			Amount of Each Disbursement this Period 293.25	
City Stillwater	State NY	Zip Code 12170	Memo Item <input type="checkbox"/>	
Purpose of Disbursement List Purchase reimbursement		Category/ Type 006		
Candidate Name			Transaction ID : B-694	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	600.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Paychex INC		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2016
Mailing Address 215 Greenfield Parkway		Amount of Each Disbursement this Period 1029.25
City Liverpool	State NY	
Zip Code 13088	Purpose of Disbursement Payroll	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B-709
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Integrated Solutions Political		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2016
Mailing Address 4142 Adams Avenue		Amount of Each Disbursement this Period 676.49
City San Diego	State CA	
Zip Code 92116	Purpose of Disbursement Credit Card Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B-706
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex INC		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2016
Mailing Address 215 Greenfield Parkway		Amount of Each Disbursement this Period 108.61
City Liverpool	State NY	
Zip Code 13088	Purpose of Disbursement Payroll	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B-726
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1814.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 52			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Mr. Hal Brown			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2016		
Mailing Address 21 Stonewyck Drive			Amount of Each Disbursement this Period 1100.00		
City Hillsborough	State NJ	Zip Code 08844	<input type="checkbox"/> Memo Item Transaction ID : B-711		
Purpose of Disbursement Photographer		Category/Type 001			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Mr. Dallas Fischer			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2016		
Mailing Address 176 Hanson Road			Amount of Each Disbursement this Period 1778.31		
City Mahtomedi	State MN	Zip Code 55115	<input type="checkbox"/> Memo Item Transaction ID : B-729		
Purpose of Disbursement Payroll		Category/Type 001			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. Mr. Dallas Fischer			Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2016		
Mailing Address 176 Hanson Road			Amount of Each Disbursement this Period 29.77		
City Mahtomedi	State MN	Zip Code 55115	<input type="checkbox"/> Memo Item Transaction ID : B-736		
Purpose of Disbursement Reimbursement food for meeting		Category/Type 007			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional)	2908.08
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Mr. Dallas Fischer		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2016
Mailing Address 176 Hanson Road		Amount of Each Disbursement this Period 86.41
City Mahtomedi	State MN	
Zip Code 55115	Purpose of Disbursement Food and supplies for video production	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 003	Transaction ID : B-737
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex INC		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2016
Mailing Address 215 Greenfield Parkway		Amount of Each Disbursement this Period 47.15
City Liverpool	State NY	
Zip Code 13088	Purpose of Disbursement Payroll	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : B-728
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2016
Mailing Address 200 Washington Avenue		Amount of Each Disbursement this Period 114.00
City Endicott	State NY	
Zip Code 13760	Purpose of Disbursement Mailing and Postage	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : B-735
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	247.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2016
Mailing Address 4333 Amon Carter Boulevard		Amount of Each Disbursement this Period 328.20
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement Travel	<input type="checkbox"/> Memo Item
Candidate Name	002 Category/ Type	Transaction ID : B-748
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Digital X-Press		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2016
Mailing Address 5 Sand Creek Road		Amount of Each Disbursement this Period 5035.79
City Albany	State NY	
Zip Code 12205	Purpose of Disbursement Mailing	<input type="checkbox"/> Memo Item
Candidate Name	003 Category/ Type	Transaction ID : B-730
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. William Milligan		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2016
Mailing Address 3214 Northampton Street Northwest		Amount of Each Disbursement this Period 335.79
City Washington	State DC	
Zip Code 20015	Purpose of Disbursement IN KIND:Event	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : B-856
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5699.78
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Integrated Solutions Political		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2016
Mailing Address 4142 Adams Avenue		Amount of Each Disbursement this Period 29.63
City San Diego	State CA Zip Code 92116	
Purpose of Disbursement Credit Card	Category/Type 003	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-755
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Mr. Dallas Fischer		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2016
Mailing Address 176 Hanson Road		Amount of Each Disbursement this Period 1778.31
City Mahtomedi	State MN Zip Code 55115	
Purpose of Disbursement Payroll	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-834
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Integrated Solutions Political		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2016
Mailing Address 4142 Adams Avenue		Amount of Each Disbursement this Period 9.30
City San Diego	State CA Zip Code 92116	
Purpose of Disbursement Credit Card Fees	Category/Type 003	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-754
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1817.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Paychex INC		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2016
Mailing Address 215 Greenfield Parkway		Amount of Each Disbursement this Period 1026.25 <input type="checkbox"/> Memo Item Transaction ID : B-762
City Liverpool	State NY	
Zip Code 13088	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Integrated Solutions Political		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2016
Mailing Address 4142 Adams Avenue		Amount of Each Disbursement this Period 3.20 <input type="checkbox"/> Memo Item Transaction ID : B-756
City San Diego	State CA	
Zip Code 92116	Purpose of Disbursement Credit Card Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Paychex INC		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2016
Mailing Address 215 Greenfield Parkway		Amount of Each Disbursement this Period 108.61 <input type="checkbox"/> Memo Item Transaction ID : B-764
City Liverpool	State NY	
Zip Code 13088	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1138.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. RedPrint Strategy		Date of Disbursement MM / DD / YYYY 05 / 27 / 2016
Mailing Address PO Box 710993		Amount of Each Disbursement this Period 13110.00
City Herndon	State VA	
Zip Code 20171	Purpose of Disbursement TV Ad Production	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	Transaction ID : B-757
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement MM / DD / YYYY 05 / 27 / 2016
Mailing Address 3701 Vestal Parkway East		Amount of Each Disbursement this Period 63.70
City Vestal	State NY	
Zip Code 13850	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 006	Transaction ID : B-783
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. FedEx Office		Date of Disbursement MM / DD / YYYY 05 / 31 / 2016
Mailing Address 3951 Vestal Parkway East		Amount of Each Disbursement this Period 136.08
City Vestal	State NY	
Zip Code 13850	Purpose of Disbursement Postage	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 006	Transaction ID : B-782
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	13309.78
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016
Mailing Address 200 Washington Avenue			Amount of Each Disbursement this Period 705.00 <input type="checkbox"/> Memo Item
City Endicott	State NY	Zip Code 13760	
Purpose of Disbursement Postage		Category/ Type 006	Transaction ID : B-781
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. Integrated Solutions Political			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2016
Mailing Address 4142 Adams Avenue			Amount of Each Disbursement this Period 3.20 <input type="checkbox"/> Memo Item
City San Diego	State CA	Zip Code 92116	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Transaction ID : B-810
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. NYSEG			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2016
Mailing Address PO Box 5240			Amount of Each Disbursement this Period 29.00 <input type="checkbox"/> Memo Item
City Binghamton	State NY	Zip Code 13902	
Purpose of Disbursement Utilities		Category/ Type 001	Transaction ID : B-787
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	737.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 52			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. NYSEG			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2016		
Mailing Address PO Box 5240			Amount of Each Disbursement this Period 9.14		
City Binghamton	State NY	Zip Code 13902	<input type="checkbox"/> Memo Item Transaction ID : B-788		
Purpose of Disbursement Utilities		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Village Printing			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2016		
Mailing Address 2800 Watson Boulevard			Amount of Each Disbursement this Period 210.60		
City Endicott	State NY	Zip Code 13760	<input type="checkbox"/> Memo Item Transaction ID : B-836		
Purpose of Disbursement Envelopes		Category/ Type 006			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. Integrated Solutions Political			Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2016		
Mailing Address 4142 Adams Avenue			Amount of Each Disbursement this Period 16.14		
City San Diego	State CA	Zip Code 92116	<input type="checkbox"/> Memo Item Transaction ID : B-811		
Purpose of Disbursement Credit Card Fees		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	235.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Integrated Solutions Political		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2016
Mailing Address 4142 Adams Avenue		Amount of Each Disbursement this Period 450.00
City San Diego	State CA Zip Code 92116	
Purpose of Disbursement Database	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-829
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. 3 West Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2016
Mailing Address 3 West 51st Street		Amount of Each Disbursement this Period 922.01
City New York	State NY Zip Code 10104	
Purpose of Disbursement Fundraiser	Category/Type 007	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-807
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. CSC Capital		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2016
Mailing Address 38 Condon Road		Amount of Each Disbursement this Period 750.00
City Stillwater	State NY Zip Code 12170	
Purpose of Disbursement Fundraising	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-808
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2122.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. FedEx Office		Date of Disbursement MM / DD / YYYY 06 / 03 / 2016
Mailing Address 3951 Vestal Parkway East		Amount of Each Disbursement this Period 210.92
City Vestal	State NY Zip Code 13850	
Purpose of Disbursement Mailing	Category/Type 006	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-837
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Integrated Solutions Political		Date of Disbursement MM / DD / YYYY 06 / 03 / 2016
Mailing Address 4142 Adams Avenue		Amount of Each Disbursement this Period 12.80
City San Diego	State CA Zip Code 92116	
Purpose of Disbursement Credit Card Fees	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-809
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Integrated Solutions Political		Date of Disbursement MM / DD / YYYY 06 / 03 / 2016
Mailing Address 4142 Adams Avenue		Amount of Each Disbursement this Period 6.10
City San Diego	State CA Zip Code 92116	
Purpose of Disbursement Credit Card Fees	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-891
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	229.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2016
Mailing Address 200 Washington Avenue		Amount of Each Disbursement this Period 611.00
City Endicott	State NY Zip Code 13760	
Purpose of Disbursement Postage	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-835
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Integrated Solutions Political		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2016
Mailing Address 4142 Adams Avenue		Amount of Each Disbursement this Period 6.40
City San Diego	State CA Zip Code 92116	
Purpose of Disbursement Credit Card Fees	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-892
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Smart Media Group, LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2016
Mailing Address 1427 Leslie Avenue Suite 100		Amount of Each Disbursement this Period 6290.00
City Alexandria	State VA Zip Code 22301	
Purpose of Disbursement Advertising	Category/Type 004	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-832
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	6907.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Phillips For Congress

Full Name (Last, First, Middle Initial) A. Paychex INC			Date of Disbursement MM / DD / YYYY 06 / 08 / 2016	
Mailing Address 215 Greenfield Parkway			Amount of Each Disbursement this Period 108.61	
City Liverpool	State NY	Zip Code 13088	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : B-889	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) B. Paychex INC			Date of Disbursement MM / DD / YYYY 06 / 08 / 2016	
Mailing Address 215 Greenfield Parkway			Amount of Each Disbursement this Period 1014.25	
City Liverpool	State NY	Zip Code 13088	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : B-890	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

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

SUBTOTAL of Disbursements This Page (optional).....	1122.86
TOTAL This Period (last page this line number only).....	86244.49

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 52
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Phillips For Congress

A. Friends of Cindy O'Brien

Full Name (Last, First, Middle Initial)
Mailing Address 12 Kattelville Road

City Binghamton State NY Zip Code 13901

Purpose of Disbursement Donation
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 09 / 2016

Amount of Each Disbursement this Period: 50.00

Memo Item

Transaction ID : B-691

B. Cortland County GOP

Full Name (Last, First, Middle Initial)
Mailing Address 60 Central Avenue

City Cortland State NY Zip Code 13045

Purpose of Disbursement Event
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 20 / 2016

Amount of Each Disbursement this Period: 80.00

Memo Item

Transaction ID : B-833

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement
Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement:

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional) 130.00

TOTAL This Period (last page this line number only) 130.00