

# 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  
Fitzpatrick for Congress

ADDRESS (number and street) PO Box 185  
 Check if different than previously reported. (ACC) Langhorne PA 19047-0185

2. **FEC IDENTIFICATION NUMBER** ▼ C00475103 CITY ▲ STATE ▲ ZIP CODE ▲  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A) STATE ▼ DISTRICT  
PA 08

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
07 / 01 / 2015 through 09 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer John Poprik  
Signature of Treasurer John Poprik *[Electronically Filed]* Date M M / D D / Y Y Y Y  
10 / 15 / 2015

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name  
**Fitzpatrick 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))....	0	13750
(b) Total Contribution Refunds (from Line 20(d)) .....	0	4575
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0	9175
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	16389.13	196015.15
(b) Total Offsets to Operating Expenditures (from Line 14).....	124.72	108616.77
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	16264.41	87398.38
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1072376.91	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

**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

**Fitzpatrick for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0	14250
(ii) Unitemized.....	0	-1000
(iii) TOTAL of contributions from individuals ▶	0	13250
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	500
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0	13750
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	0
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	124.72	108616.77
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	380.19	1339.06
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	504.91	123705.83

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16389.13	196015.15
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	75
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	4500
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	4575
21. OTHER DISBURSEMENTS .....	7850	26125
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	24239.13	226715.15

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1096111.13
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	504.91
25. SUBTOTAL (add Line 23 and Line 24).....	1096616.04
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	24239.13
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1072376.91

**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 27
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input checked="" 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)  
**Fitzpatrick for Congress**

**A. Citizens Bank**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 525 William Penn Place  
 City Pittsburgh State PA Zip Code 15219-1708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify) General 2014  
 Election Cycle-to-Date  
 690.56

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015  
**Transaction ID : A-MF17045**  
 Amount of Each Receipt this Period  
 31.29  
 Interest Income

**B. Fulton Bank**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Penn Square  
 City Lancaster State PA Zip Code 17602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify) General 2014  
 Election Cycle-to-Date  
 380.24

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015  
**Transaction ID : A-MF17044**  
 Amount of Each Receipt this Period  
 15.63  
 Interest Income

**C. Presidential Bank**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4520 East West Highway  
 City Bethesda State MD Zip Code 20814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify) General 2014  
 Election Cycle-to-Date  
 1474.17

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015  
**Transaction ID : A-MF17043**  
 Amount of Each Receipt this Period  
 60.02  
 Interest Income

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

106.94

**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 27
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Fitzpatrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Wells Fargo Bank**

Mailing Address 1500 Broadway Street

City Lubbock State TX Zip Code 79401

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) General 2014

Election Cycle-to-Date **1020**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2015**

**Transaction ID : A-MF17042**

Amount of Each Receipt this Period  
**21.14**

Interest Income

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

Mailing Address 525 William Penn Place

City Pittsburgh State PA Zip Code 15219-1708

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) General 2014

Election Cycle-to-Date **690.56**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2015**

**Transaction ID : A-MF17056**

Amount of Each Receipt this Period  
**31.29**

Interest Income

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

Mailing Address One Penn Square

City Lancaster State PA Zip Code 17602

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) General 2014

Election Cycle-to-Date **380.24**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2015**

**Transaction ID : A-MF17057**

Amount of Each Receipt this Period  
**15.63**

Interest Income

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

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

**68.06**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Fitzpatrick for Congress**

**A. Presidential Bank**

Full Name (Last, First, Middle Initial)  
Mailing Address 4520 East West Highway

City State Zip Code  
Bethesda MD 20814

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) General 2014

Election Cycle-to-Date  
**1474.17**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 31 2015**

**Transaction ID : A-MF17055**

Amount of Each Receipt this Period  
**60.04**

Interest Income

**B. Wells Fargo Bank**

Full Name (Last, First, Middle Initial)  
Mailing Address 1500 Broadway Street

City State Zip Code  
Lubbock TX 79401

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) General 2014

Election Cycle-to-Date  
**1020**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 31 2015**

**Transaction ID : A-MF17054**

Amount of Each Receipt this Period  
**21.15**

Interest Income

**C. Citizens Bank**

Full Name (Last, First, Middle Initial)  
Mailing Address 525 William Penn Place

City State Zip Code  
Pittsburgh PA 15219-1708

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) General 2014

Election Cycle-to-Date  
**690.56**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 30 2015**

**Transaction ID : A-MF17072**

Amount of Each Receipt this Period  
**30.29**

Interest Income

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

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

**111.48**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 27
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Fulton Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2015
Mailing Address One Penn Square		<b>Transaction ID : A-MF17071</b>
City Lancaster	State PA Zip Code 17602	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.12
Name of Employer Occupation		Interest Income
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014		Election Cycle-to-Date 380.24

Full Name (Last, First, Middle Initial) <b>B. Presidential Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2015
Mailing Address 4520 East West Highway		<b>Transaction ID : A-MF17070</b>
City Bethesda	State MD Zip Code 20814	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 58.11
Name of Employer Occupation		Interest Income
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014		Election Cycle-to-Date 1474.17

Full Name (Last, First, Middle Initial) <b>C. Wells Fargo Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2015
Mailing Address 1500 Broadway Street		<b>Transaction ID : A-MF17069</b>
City Lubbock	State TX Zip Code 79401	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.48
Name of Employer Occupation		Interest Income
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014		Election Cycle-to-Date 1020

<b>SUBTOTAL</b> of Receipts This Page (optional).....	93.71
<b>TOTAL</b> This Period (last page this line number only).....	380.19



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 27			
	<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)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2015
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 1106.63
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-17030</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2015
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 625
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement Compliance Consulting	<b>Transaction ID : B-S-2818</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(07/06/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2015
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 125
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement General Office Supplies	<b>Transaction ID : B-S-2819</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(07/06/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1106.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 27	
	<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)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 648.75
City Memphis	State TN	
Zip Code 38101-1140	Purpose of Disbursement Express Shipping	Transaction ID : B-S-2820
Candidate Name	Category/Type 001	
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)	[MEMO ITEM] Subitemization of Campaign Financial Services(07/06/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 325
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement Compliance Consulting	Transaction ID : B-S-2821
Candidate Name	Category/Type 001	
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)	[MEMO ITEM] Subitemization of Campaign Financial Services(07/06/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Next Wave Consulting, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2015
Mailing Address 202 Airport Boulevard		Amount of Each Disbursement this Period 648.75
City Doylestown	State PA	
Zip Code 18902	Purpose of Disbursement Software Service	Transaction ID : B-E-17034
Candidate Name	Category/Type 001	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	648.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 27			
	<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)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Next Wave Consulting, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 202 Airport Boulevard		Amount of Each Disbursement this Period 216.25 <b>Transaction ID : B-E-17035</b>
City Doylestown	State PA Zip Code 18902	
Purpose of Disbursement Software Service	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2015
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 600 <b>Transaction ID : B-E-17037</b>
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Software Service	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Citizens for Prosperity in America Today PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015
Mailing Address 228 S Washington Street Suite 115		Amount of Each Disbursement this Period 5000 <b>Transaction ID : B-E-17039</b>
City Alexandria	State VA Zip Code 22314-5404	
Purpose of Disbursement Political Contribution	Category/Type 011	
Candidate Name <b>Citizens for Prosperity in America Today PAC</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5816.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 27	
	<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)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2015	
Mailing Address PO Box 1270			Amount of Each Disbursement this Period 1877.81	
City Newark	State NJ	Zip Code 07101-1270	Transaction ID : B-E-17040	
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2015	
Mailing Address 300 1st Street SE			Amount of Each Disbursement this Period 374.6	
City Washington	State DC	Zip Code 20003-1801	Transaction ID : B-S-2832	
Purpose of Disbursement Meal Expense		Category/ Type 001	[MEMO ITEM] Subitemization of American Express(07/27/15)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2015	
Mailing Address 300 1st Street SE			Amount of Each Disbursement this Period 100.54	
City Washington	State DC	Zip Code 20003-1801	Transaction ID : B-S-2822	
Purpose of Disbursement Meal Expense		Category/ Type 001	[MEMO ITEM] Subitemization of American Express(07/27/15)	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1877.81
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 27			
	<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)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tortilla Coast</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2015		
Mailing Address 400 1st Street SE			Amount of Each Disbursement this Period 87.03		
City Washington	State DC	Zip Code 20003	Transaction ID : B-S-2825		
Purpose of Disbursement Meal Expense		Category/ Type 001	[MEMO ITEM] Subitemization of American Express(07/27/15)		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Union League of Philadelphia</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2015		
Mailing Address 140 South Broad Street			Amount of Each Disbursement this Period 265.55		
City Philadelphia	State PA	Zip Code 19102-3003	Transaction ID : B-S-2823		
Purpose of Disbursement Meal Expense		Category/ Type 001	[MEMO ITEM] Subitemization of American Express(07/27/15)		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. Safeway</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2015		
Mailing Address 490 L Street NW			Amount of Each Disbursement this Period 106.75		
City Washington	State DC	Zip Code 20001	Transaction ID : B-S-2829		
Purpose of Disbursement Meal Expense		Category/ Type 001	[MEMO ITEM] Subitemization of American Express(07/27/15)		
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: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 27			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2015
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 174.4
City Lehigh Valley	State PA	Zip Code 18002-5505
Purpose of Disbursement Cellular Phone Service	Category/ Type 001	
Candidate Name	Transaction ID : B-S-2833	
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)	[MEMO ITEM] Subitemization of American Express(07/27/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Constant Contact</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2015
Mailing Address 1601 Trapelo Road Suite 329		Amount of Each Disbursement this Period 63.6
City Waltham	State MA	Zip Code 02451-7357
Purpose of Disbursement Software Service	Category/ Type 001	
Candidate Name	Transaction ID : B-S-2827	
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)	[MEMO ITEM] Subitemization of American Express(07/27/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. We the Pizza</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2015
Mailing Address 305 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 149.85
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Meal Expense	Category/ Type 001	
Candidate Name	Transaction ID : B-S-2830	
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)	[MEMO ITEM] Subitemization of American Express(07/27/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 15 OF 27			
	<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)  
**Fitzpatrick for Congress**

**A. Shelly's Backroom**

Full Name (Last, First, Middle Initial)  
Mailing Address 1331 F Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement Meal Expense 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement 07 / 27 / 2015

Amount of Each Disbursement this Period 275.78

**Transaction ID : B-S-2831**

**[MEMO ITEM]**  
Subitemization of American Express(07/27/15)

**B. Brothers Pizza of Langhorne**

Full Name (Last, First, Middle Initial)  
Mailing Address 184 North Pine Street

City Langhorne State PA Zip Code 19047

Purpose of Disbursement Meal Expense 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement 07 / 27 / 2015

Amount of Each Disbursement this Period 136.74

**Transaction ID : B-S-2834**

**[MEMO ITEM]**  
Subitemization of American Express(07/27/15)

**C. American Express**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement Foreign Transaction Fee 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement 07 / 27 / 2015

Amount of Each Disbursement this Period 0.38

**Transaction ID : B-S-2837**

**[MEMO ITEM]**  
Subitemization of American Express(07/27/15)

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only)..... 0.00

**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 16 OF 27			
	<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)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Next Wave Consulting, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2015
Mailing Address 202 Airport Boulevard		Amount of Each Disbursement this Period 216.25 <b>Transaction ID : B-E-17046</b>
City Doylestown	State PA	
Zip Code 18902	Purpose of Disbursement Software Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Samsar Consulting, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2015
Mailing Address 104 Tulip Road		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-17047</b>
City Holland	State PA	
Zip Code 18966-2429	Purpose of Disbursement Strategic Campaign Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Complete Campaigns</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 600 <b>Transaction ID : B-E-17048</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Software Service	Category/ Type 001
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1316.25
<b>TOTAL</b> 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 17 OF 27	
	<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)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 963.7
City Newark	State NJ	Zip Code 07101-1270
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	
Candidate Name	Transaction ID : B-E-17049	
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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 168.21
City Lehigh Valley	State PA	Zip Code 18002-5505
Purpose of Disbursement Cellular Phone Service	Category/Type 001	
Candidate Name	Transaction ID : B-S-2846	
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)	[MEMO ITEM] Subitemization of American Express(08/17/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. TreFratelli</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 17 Doublewoods Road		Amount of Each Disbursement this Period 36.5
City Langhorn	State PA	Zip Code 19047
Purpose of Disbursement Meal Expense	Category/Type 001	
Candidate Name	Transaction ID : B-S-2842	
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)	[MEMO ITEM] Subitemization of American Express(08/17/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	963.70
<b>TOTAL</b> 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 18 OF 27	
	<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)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dubliner Restaurant</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 520 North Capital Street NW		Amount of Each Disbursement this Period 340.8
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Meal Expense	Transaction ID : B-S-2843
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/17/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Union League of Philadelphia</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 140 South Broad Street		Amount of Each Disbursement this Period 69.3
City Philadelphia	State PA	
Zip Code 19102-3003	Purpose of Disbursement Meal Expense	Transaction ID : B-S-2844
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/17/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Constant Contact</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 1601 Trapelo Road Suite 329		Amount of Each Disbursement this Period 63.6
City Waltham	State MA	
Zip Code 02451-7357	Purpose of Disbursement Software Service	Transaction ID : B-S-2845
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/17/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 19 OF 27			
	<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)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 30th Street Station		Amount of Each Disbursement this Period 87
City Philadelphia	State PA Zip Code 19104	
Purpose of Disbursement Transportation	Category/Type 002	<b>Transaction ID : B-S-2841</b>  <b>[MEMO ITEM]</b> Subitemization of American Express(08/17/15)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 750
City Bethesda	State MD Zip Code 20824-0844	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	<b>Transaction ID : B-E-17050</b>  Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 125
City Bethesda	State MD Zip Code 20824-0844	
Purpose of Disbursement General Office Supplies	Category/Type 001	<b>Transaction ID : B-S-2848</b>  <b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(08/17/15)
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	750.00
<b>TOTAL</b> 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 20 OF 27			
	<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)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 625
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement Compliance Consulting	<b>Transaction ID : B-S-2847</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(08/17/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Conwell Egan Football</b>		Date of Disbursement MM / DD / YYYY 09 / 08 / 2015
Mailing Address 248 Dogwood Drive		Amount of Each Disbursement this Period 300
City Levittown	State PA	
Zip Code 19055	Purpose of Disbursement Advertising	<b>Transaction ID : B-E-17058</b>
Candidate Name	004 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Next Wave Consulting, Inc.</b>		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 202 Airport Boulevard		Amount of Each Disbursement this Period 216.25
City Doylestown	State PA	
Zip Code 18902	Purpose of Disbursement Software Service	<b>Transaction ID : B-E-17060</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	516.25
<b>TOTAL</b> 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 21 OF 27			
	<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)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Samsar Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2015
Mailing Address 104 Tulip Road		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-17059</b>
City Holland	State PA	
Zip Code 18966-2429	Purpose of Disbursement Strategic Campaign Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2015
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 750 <b>Transaction ID : B-E-17063</b>
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement SEE MEMO ITEMS	Category/ Type 001
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:	

Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2015
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 625 <b>Transaction ID : B-S-2849</b>
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement Compliance Consulting	Category/ Type 001
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:	

**[MEMO ITEM]**  
Subitemization of Campaign Financial Services(09/11/15)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1250.00
<b>TOTAL</b> 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 22 OF 27	
	<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)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2015
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 125
City Bethesda	State MD	Zip Code 20824-0844
Purpose of Disbursement General Office Supplies	Category/ Type 001	
Candidate Name		Transaction ID : B-S-2850  [MEMO ITEM] Subitemization of Campaign Financial Services(09/11/15)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 600
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Software Service	Category/ Type 001	
Candidate Name		Transaction ID : B-E-17064
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 1278.49
City Newark	State NJ	Zip Code 07101-1270
Purpose of Disbursement SEE MEMO ITEMS	Category/ Type 001	
Candidate Name		Transaction ID : B-E-17066  Original vendors exceeding reporting threshold itemized as memo transactions.
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1878.49
<b>TOTAL</b> 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 23 OF 27			
	<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)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 30th Street Station		Amount of Each Disbursement this Period 000,000.00 25
City Philadelphia	State PA Zip Code 19104	
Purpose of Disbursement Parking Fee	Category/Type 002	<b>Transaction ID : B-S-2854</b>  <b>[MEMO ITEM]</b> Subitemization of American Express(09/22/15)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 000,000.00 639.63
City Washington	State DC Zip Code 20003-1801	
Purpose of Disbursement Meal Expense	Category/Type 001	<b>Transaction ID : B-S-2857</b>  <b>[MEMO ITEM]</b> Subitemization of American Express(09/22/15)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Constant Contact</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 1601 Trapelo Road Suite 329		Amount of Each Disbursement this Period 000,000.00 63.6
City Waltham	State MA Zip Code 02451-7357	
Purpose of Disbursement Software Service	Category/Type 001	<b>Transaction ID : B-S-2858</b>  <b>[MEMO ITEM]</b> Subitemization of American Express(09/22/15)
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 24 OF 27		
	<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)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address 2300 East Lincoln Highway		Amount of Each Disbursement this Period 169.51
City Langhorne State PA Zip Code 19047	Purpose of Disbursement Cellular Phone Service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : B-S-2861</b> <b>[MEMO ITEM]</b> Subitemization of American Express(09/22/15)

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	16124.13



**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 25 OF 27	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Fitzpatrick for Congress**

**A. Senate Republican Campaign Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 792

City Harrisburg State PA Zip Code 17108-0792

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) General 2014

State: District:

Date of Disbursement: 07 / 22 / 2015

Amount of Each Disbursement this Period: 2500

Transaction ID : B-E-17038

Category/Type: 011

**B. Warminster Township Republican Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 3151

City Warminster State PA Zip Code 18974-0116

Purpose of Disbursement Political Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) General 2014

State: District:

Date of Disbursement: 08 / 17 / 2015

Amount of Each Disbursement this Period: 250

Transaction ID : B-E-17051

Category/Type: 011

**C. Ancient Order of Hibernians**

Full Name (Last, First, Middle Initial)  
Mailing Address 16 Robinhood Drive

City Fallsington State PA Zip Code 19054

Purpose of Disbursement Charitable Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 08 / 25 / 2015

Amount of Each Disbursement this Period: 1500

Transaction ID : B-E-17052

Category/Type: 012

**SUBTOTAL** of Disbursements This Page (optional)..... 4250.00

**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 26 OF 27	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Friends of Borda and McNamara</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2015
Mailing Address 1015 Darby Drive		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-17062</b>
City Yardley	State PA	
Zip Code 19067-4518	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Friends of Marguerite Quinn</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address PO Box 58		Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-17065</b>
City Doylestown	State PA	
Zip Code 18901-0058	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name <b>Marguerite C. Quinn</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014	State: District:	(For State/Local Candidate Support)

Full Name (Last, First, Middle Initial) <b>c. Poliquin For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2015
Mailing Address PO Box 50		Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-17067</b>
City Oakland	State ME	
Zip Code 04963-0050	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name <b>Bruce L Poliquin</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: ME District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2500.00
<b>TOTAL</b> 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 27 OF 27	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Fitzpatrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Royce Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 29 / 2015</b>
Mailing Address PO Box 3249		Amount of Each Disbursement this Period <b>1000</b> <b>Transaction ID : B-E-17068</b>
City Fullerton State CA Zip Code 92834-3249	Purpose of Disbursement Political Contribution Category/Type <b>011</b>	
Candidate Name <b>Ed Royce</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 39		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement 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:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>7750.00</b>