

# 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

Tom Reed for Congress

ADDRESS (number and street)

PO Box 450

Check if different than previously reported. (ACC)

Victor

NY

14564-0450

2. FEC IDENTIFICATION NUMBER ▼

C C00464032

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

NY

23

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 11 / 06 / 2012 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

10 / 01 / 2012 through 10 / 17 / 2012

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 Reed

Signature of Treasurer John Reed

[Electronically Filed]

Date

01 / 22 / 2013

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Tom Reed 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))....	103707.5	1891845.76
(b) Total Contribution Refunds (from Line 20(d)) .....	0	636
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	103707.5	1891209.76
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	587163.04	1676745.04
(b) Total Offsets to Operating Expenditures (from Line 14).....	2000	2000
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	585163.04	1674745.04
8. Cash on Hand at Close of Reporting Period (from Line 27).....	329517.93	
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

**Tom Reed 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).....	49935	199190
(ii) Unitemized.....	4244.1	591020.67
(iii) TOTAL of contributions from individuals ▶	54179.1	790210.67
(b) Political Party Committees.....	3950	19582
(c) Other Political Committees (such as PACs).....	45578.4	1081400.92
(d) The Candidate.....	0	652.17
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	103707.5	1891845.76
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	108.96	99419.92
<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>	2000	2000
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0	4291.33
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	105816.46	1997557.01

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	587163.04	1676745.04
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	30000
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	30000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	636
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	636
21. OTHER DISBURSEMENTS .....	1250	2620
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	588413.04	1710001.04

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	812114.51
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	105816.46
25. SUBTOTAL (add Line 23 and Line 24).....	917930.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	588413.04
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	329517.93

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A  
Transaction ID :

Amended to reflect additional deposit due to lost check

Form/Schedule:  
Transaction ID:

**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 73
	<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)  
**Tom Reed for Congress**

**A. Cape Capital LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 712 Lyles Lane  
 City Alexandria State VA Zip Code 22314-6252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : A-C7264**  
 Amount of Each Receipt this Period  
 500  
 Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

**B. V. Bruce Thompson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1350 I Street NW Suite 510  
 City Washington State DC Zip Code 20005-3355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 AXPC President  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : A-PI880**  
 Amount of Each Receipt this Period  
 500  
**[MEMO ITEM]**  
 Partnership Itemization Memo

**C. Yocha Dehe Wintun Nation**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 18  
 City Brooks State CA Zip Code 95606-0018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012  
**Transaction ID : A-C7075**  
 Amount of Each Receipt this Period  
 2500

**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 7 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Roger G. Ackerman**

Mailing Address 10501 North Road

City State Zip Code  
Corning NY 14830-3264

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

Name of Employer Occupation  
Self Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7263**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Frederick H. Ahrens**

Mailing Address 88 Tioga Avenue

City State Zip Code  
Corning NY 14830-2858

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

Name of Employer Occupation  
Reed Law Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1729**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2012

**Transaction ID : A-C7185**

Amount of Each Receipt this Period  
**1000**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Justin Allen**

Mailing Address 145 Cara Vella Lane

City State Zip Code  
Centerville UT 84014-2819

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

Name of Employer Occupation  
Salt Lake Board of Realtors Govt Relations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : A-C7225**

Amount of Each Receipt this Period  
**250**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Allen**

Mailing Address 18306 Shavers Lake Drive

City State Zip Code  
Wayzata MN 55391-3339

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

Name of Employer Occupation  
Minneapolis Area Assn Realto Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : A-C7233**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Clayton A. Ambrose**

Mailing Address 931 Oak Hill Drive

City State Zip Code  
Elmira NY 14905-1435

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

Name of Employer Occupation  
Realty USA Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**800**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7122**

Amount of Each Receipt this Period  
**50**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Bradley J. Arthur**

Mailing Address 8050 Highland Farms Drive

City State Zip Code  
East Amherst NY 14051-2504

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

Name of Employer Occupation  
Black Rock Pharmacy Pharmacist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2012

**Transaction ID : A-C7188**

Amount of Each Receipt this Period  
**500**

Contribution

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

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

**1050.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Donald W. Arthur Jr.**

Mailing Address 47 Davinci Court

City State Zip Code  
Buffalo NY 14221-2771

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Brighten Eggert Pharmacy Pharmacist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-C7220**

Amount of Each Receipt this Period

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

Mailing Address PO Box 31051

City State Zip Code  
Rochester NY 14603-1051

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Nixon Peabody Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-C7326**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Brad M Boersen**

Mailing Address 10502 Skyline Drive

City State Zip Code  
Corning NY 14830-3258

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Corning, Inc. Director, Strategy COF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-C7062**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 73
	<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)  
**Tom Reed for Congress**

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

Mailing Address PO Box 513

City State Zip Code  
Iola KS 66749-0513

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

Name of Employer Occupation  
Allen County Realty Real Estate Broker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 05 / 2012

**Transaction ID : A-C7232**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Cheryl Capps**

Mailing Address 3032 S Oakwood Dr

City State Zip Code  
Painted Post NY 14870

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

Name of Employer Occupation  
Corning Inc VP Procurement & Transportation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 04 / 2012

**Transaction ID : A-C7105**

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Jack H. Cleland**

Mailing Address 62 E 5th Street

City State Zip Code  
Corning NY 14830-3141

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

Name of Employer Occupation  
Corning Inc Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 17 / 2012

**Transaction ID : A-C7163**

Amount of Each Receipt this Period  
500  
Contribution

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Antionetta Colaruotolo**

Mailing Address **27 Emerald Hill Circle**

City **Fairport** State **NY** Zip Code **14450-9504**

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

Name of Employer **Casa Larga Vineyard** Occupation **Owner**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 17 / 2012**

**Transaction ID : A-C7120**

Amount of Each Receipt this Period  
**150**

**B.** Full Name (Last, First, Middle Initial)  
**Anthony J. Colucci Jr.**

Mailing Address **350 Main Street  
Suite 1400**

City **Buffalo** State **NY** Zip Code **14202-3750**

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

Name of Employer **Bouvier Partnership LLP** Occupation **Attorney**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 12 / 2012**

**Transaction ID : A-C7199**

Amount of Each Receipt this Period  
**100**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Ric Cortis**

Mailing Address **119 Mayfair Road**

City **Hattiesburg** State **MS** Zip Code **39402-1464**

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

Name of Employer **RE/MAX** Occupation **Broker/Owner**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 05 / 2012**

**Transaction ID : A-C7240**

Amount of Each Receipt this Period  
**500**

**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 12 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dennis Cronk**

Mailing Address 3310 Kingsbury Circle

City State Zip Code  
Roanoke VA 24014-1398

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

Name of Employer Occupation  
Poe & Cronk Real Estate Grou Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 11 / 2012**

**Transaction ID : A-C7221**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Cheryl Crozier**

Mailing Address 2868 Chequers Circle

City State Zip Code  
Big Flats NY 14814-9610

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

Name of Employer Occupation  
Corning, Inc. Govt. Affairs Coordinator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**355**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 15 / 2012**

**Transaction ID : A-C7064**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Martin J. Curran**

Mailing Address 11983 Jolley Way

City State Zip Code  
Corning NY 14830-9154

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

Name of Employer Occupation  
Corning, Inc. Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 12 / 2012**

**Transaction ID : A-C7189**

Amount of Each Receipt this Period  
**500**

Contribution

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

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

**1100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Paul De Carolis**

Mailing Address 115 Raton Avenue

City Rochester State NY Zip Code 14626-4503

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

Name of Employer De Carolis Trucking Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **425**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2012

**Transaction ID : A-C7193**

Amount of Each Receipt this Period  
 Contribution **150**

**B.** Full Name (Last, First, Middle Initial)  
**Gayle Dennehy**

Mailing Address 28 Perron Road

City Plainville State CT Zip Code 06062-1100

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

Name of Employer Dennehy and Company Occupation Realtor-Broker-Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : A-C7235**

Amount of Each Receipt this Period  
 Contribution **250**

**C.** Full Name (Last, First, Middle Initial)  
**Kerry DeWitt**

Mailing Address 17 Palmer Avenue

City Delmar State NY Zip Code 12054-3127

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

Name of Employer NY Presbyterian Occupation Sr VP External Relations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7320**

Amount of Each Receipt this Period  
 Contribution **500**

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

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

**900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Michael W. Donnelly**

Mailing Address 3017 Goff Road

City Corning State NY Zip Code 14830-9707

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

Name of Employer Corning Inc. Occupation VP

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3125**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7147**

Amount of Each Receipt this Period  
 Contribution **1000**

**B.** Full Name (Last, First, Middle Initial)  
**Ronald Dougherty**

Mailing Address 26 Ross Street

City Owego State NY Zip Code 13827-1610

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

Name of Employer Self Occupation Reired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7321**

Amount of Each Receipt this Period  
 Contribution **250**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Frances P. Elliott**

Mailing Address 118 Arlington Street

City Winchester State MA Zip Code 01890-3306

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

Name of Employer self Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1150**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : A-C7090**

Amount of Each Receipt this Period  
 Contribution **100**

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

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

**1350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Faye Emerson**

Mailing Address PO Box 5078

City State Zip Code  
Twin Falls ID 83303-5078

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

Name of Employer Occupation  
Magic Valley Realty Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 11 / 2012**

**Transaction ID : A-C7222**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Stanley G. Fendley**

Mailing Address 600 E Columbia Street

City State Zip Code  
Falls Church VA 22046-3623

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

Name of Employer Occupation  
Corning Gov't Affairs

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 17 / 2012**

**Transaction ID : A-C7148**

Amount of Each Receipt this Period  
**500**

Contribution

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

Mailing Address 5304 19th Street NW

City State Zip Code  
Gig Harbor WA 98335-7503

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

Name of Employer Occupation  
John L Scott University PI Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 05 / 2012**

**Transaction ID : A-C7237**

Amount of Each Receipt this Period  
**500**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Hon. Christopher S Friend**

Mailing Address **PO Box 441**

City **Big Flats** State **NY** Zip Code **14814-0441**

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

Name of Employer **NY State Assembly** Occupation **Member**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 04 / 2012**

**Transaction ID : A-C7103**

Amount of Each Receipt this Period  
**500**

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

Mailing Address **790 Cambridge Drive**

City **Lake Ozark** State **MO** Zip Code **65049-6708**

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

Name of Employer **Self** Occupation **Real Estate Broker**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 05 / 2012**

**Transaction ID : A-C7239**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Richard N. George**

Mailing Address **14 Oakfield Way**

City **Pittsford** State **NY** Zip Code **14534-1888**

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

Name of Employer **Self** Occupation **Retired**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 17 / 2012**

**Transaction ID : A-C7116**

Amount of Each Receipt this Period  
**500**

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

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

**1500.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Michael I. German**

Mailing Address 9641 Sycamore Lane

City State Zip Code  
Painted Post NY 14870-9085

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

Name of Employer Occupation  
Corning National Gas Executive Officer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**875**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 11 / 2012**

**Transaction ID : A-C7187**

Amount of Each Receipt this Period  
**500**

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Debera Gibbs**

Mailing Address 1101 Jaidyn Drive

City State Zip Code  
Rock Springs WY 82901-7706

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

Name of Employer Occupation  
Real Estate Pros Associate Broker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 05 / 2012**

**Transaction ID : A-C7226**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Susan Ginkel**

Mailing Address 1838 Circle Road

City State Zip Code  
Towson MD 21204-6415

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

Name of Employer Occupation  
Self Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 09 / 2012**

**Transaction ID : A-C6983**

Amount of Each Receipt this Period  
**2500**

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

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

**4000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas J. Gough**

Mailing Address 18 Heritage Lane

City Horseheads State NY Zip Code 14845-9015

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

Name of Employer Gough Holding Corp Occupation Property Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2012

**Transaction ID : A-C7200**

Amount of Each Receipt this Period  
 Contribution **250**

**B.** Full Name (Last, First, Middle Initial)  
**Hon. Sidney S. Graubard**

Mailing Address 481 Wygant Road

City Horseheads State NY Zip Code 14845-1639

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

Name of Employer Chemung County Occupation Legislator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **609**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 02 / 2012

**Transaction ID : A-C6908**

Amount of Each Receipt this Period  
 Contribution **150**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Kirk P Gregg**

Mailing Address 2119 Spencer Hill Road

City Corning State NY Zip Code 14830-9550

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

Name of Employer Corning, Inc. Occupation Chief Administrative Officer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : A-C7101**

Amount of Each Receipt this Period  
 Contribution **500**

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

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

**900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Penelope Y Gregg**

Mailing Address 2119 Spencer Hill Road

City Corning State NY Zip Code 14830-9550

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

Name of Employer Self Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : A-C7102**

Amount of Each Receipt this Period  
 2000

**B.** Full Name (Last, First, Middle Initial)  
**John C. Hecker**

Mailing Address PO Box 682

City Angelica State NY Zip Code 14709-0682

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

Name of Employer Worley Parsons Occupation Inspector

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7143**

Amount of Each Receipt this Period  
 250  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Karen Hogue**

Mailing Address 76 W Market Street

City Corning State NY Zip Code 14830-2527

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

Name of Employer Market Street Apothecary Occupation Pharmacist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **790**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : A-C7262**

Amount of Each Receipt this Period  
 30

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

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

2280.00

**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 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James R. Houghton**

Mailing Address 2649 Spencer Hill Road

City State Zip Code  
Corning NY 14830-9506

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

Name of Employer self Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **6250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : A-C7224**

Amount of Each Receipt this Period  
 2500

**B.** Full Name (Last, First, Middle Initial)  
**Thomas C. Ioele**

Mailing Address 27 Wood Creek Drive

City State Zip Code  
Pittsford NY 14534-4410

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

Name of Employer Employee Relations Associates Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : A-C7072**

Amount of Each Receipt this Period  
 1500

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Cheryl A. Jackson**

Mailing Address PO Box 795

City State Zip Code  
Andover NY 14806-0795

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

Name of Employer Self Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1125**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7322**

Amount of Each Receipt this Period  
 1000

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nancy Johnson**

Mailing Address 129 D Street SE

City Washington State DC Zip Code 20003-1809

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

Name of Employer Baker Donelson Occupation Sr. Public Policy Advisor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 11 / 2012

**Transaction ID : A-C7259**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Charles H. Joyce**

Mailing Address PO Box 783

City Andover State NY Zip Code 14806-0783

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

Name of Employer Otis Eastern Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3179**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7136**

Amount of Each Receipt this Period  
**650**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Richard W. Joyce**

Mailing Address PO Box 330

City Wellsville State NY Zip Code 14895-0330

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

Name of Employer Otis Eastern Service Occupation Pipeline Construction Foreman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7156**

Amount of Each Receipt this Period  
**200**  
 Contribution

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

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

**1850.00**

**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 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Bruce M. Kennedy**

Mailing Address 5920 Seneca Point Road

City Naples State NY Zip Code 14512-9764

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

Name of Employer Self Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : A-C7095**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50

**B.** Full Name (Last, First, Middle Initial)  
**Hon. Linda W Kohl**

Mailing Address 161 Highledge Drive

City Penfield State NY Zip Code 14526-2450

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

Name of Employer Town of Penfield Occupation Town Councilperson

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **208**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2012

**Transaction ID : A-C7212**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 30

Contribution

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

Mailing Address 1101 Maple Avenue

City Elmira State NY Zip Code 14904-2809

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

Name of Employer Elmira Water Board Occupation General Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2012

**Transaction ID : A-C6978**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250

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

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

\_\_\_\_\_ 330.00

\_\_\_\_\_

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

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

FOR LINE NUMBER: (check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15  
 PAGE 23 OF 73

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Christopher J. Lee**

Mailing Address 1838 Circle Road

City State Zip Code  
 Towson MD 21204-6415

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

Name of Employer Occupation  
 Highstar Capital Managing Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 10 / 2012**

**Transaction ID : A-C7254**

Amount of Each Receipt this Period  
**2500**

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

Mailing Address 166 Morris Avenue

City State Zip Code  
 Buffalo NY 14214-1610

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

Name of Employer Occupation  
 Self Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 16 / 2012**

**Transaction ID : A-C7086**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Andy Mahowald**

Mailing Address 1330 15th Street Circle

City State Zip Code  
 Watertown SD 57201-7396

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

Name of Employer Occupation  
 Self Real Estate Sales

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 05 / 2012**

**Transaction ID : A-C7229**

Amount of Each Receipt this Period  
**500**

**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: (check only one)	PAGE 24 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marsha Marsh**

Mailing Address 8795 Martha Way

City Waterford State PA Zip Code 16441-4067

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

Name of Employer Marsha Marsh RES Occupation Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : A-C7236**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 1655 W Alluvial Avenue

City Fresno State CA Zip Code 93711-0585

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

Name of Employer Keller Williams Realty Occupation Broker/Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : A-C7242**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Karl Martone**

Mailing Address 19 Primrose Lane

City Johnston State RI Zip Code 02919-2889

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

Name of Employer Martone Group inc RE/MAX Occupation Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : A-C7238**

Amount of Each Receipt this Period  
**500**

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

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

**1500.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Robert L. McCrory Jr.**

Mailing Address 16 Sand Brook Road

City State Zip Code  
Pittsford NY 14534-3561

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

Name of Employer Occupation  
University of Rochester Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 17 / 2012**

**Transaction ID : A-C7174**

Amount of Each Receipt this Period  
 Contribution **1250**

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

Mailing Address 12 Knollbrook Lane W

City State Zip Code  
Painted Post NY 14870-9344

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

Name of Employer Occupation  
Nancy A Socha & Associates Portfolio Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 14 / 2012**

**Transaction ID : A-C7059**

Amount of Each Receipt this Period  
 Contribution **250**

**C.** Full Name (Last, First, Middle Initial)  
**R. Layne Morrill**

Mailing Address PO Box 307

City State Zip Code  
Kimberling City MO 65686-0307

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

Name of Employer Occupation  
Shepherd of the Hill Realtor Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 15 / 2012**

**Transaction ID : A-C7071**

Amount of Each Receipt this Period  
 Contribution **1500**

**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 26 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jeffrey R. Morris**

Mailing Address 154 N Glenora Road

City State Zip Code  
Dundee NY 14837-8817

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

Name of Employer Occupation  
Glenora Farms Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**550**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 15 / 2012**

**Transaction ID : A-C7100**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Veronica Mullenix**

Mailing Address 1539 S Mason Road # 78

City State Zip Code  
Katy TX 77450-4559

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

Name of Employer Occupation  
Veronica Mullenix Real Estat Real Estate Broker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 05 / 2012**

**Transaction ID : A-C7234**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John F. O'Mara**

Mailing Address 84 Oak Hill Road

City State Zip Code  
Horseheads NY 14845-8113

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

Name of Employer Occupation  
Davidson & O'Mara Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 15 / 2012**

**Transaction ID : A-C7063**

Amount of Each Receipt this Period  
**1000**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Oneill Esq.**

Mailing Address 1749 Seaton Street NW

City Washington State DC Zip Code 20009-2625

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

Name of Employer Ogilvy & Mather Occupation Atty/consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2012

**Transaction ID : A-C7255**

Amount of Each Receipt this Period  
 500

**B.** Full Name (Last, First, Middle Initial)  
**John H. Peterson M.D.**

Mailing Address 1 Fox Run Lane Apt. 623

City Orchard Park State NY Zip Code 14127-3173

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

Name of Employer Self Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2012

**Transaction ID : A-C7196**

Amount of Each Receipt this Period  
 100  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Donald G. Quick**

Mailing Address 825 Underwood Avenue

City Elmira State NY Zip Code 14905-1336

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

Name of Employer Mengel, Metzger, Barr & Co. Occupation CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7117**

Amount of Each Receipt this Period  
 250

**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 28 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Melinda Rich**

Mailing Address 81100 Old Highway

City Islamorada State FL Zip Code 33036-3715

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

Name of Employer Rich Products Occupation Executive VP

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 16 / 2012

**Transaction ID : A-C7085**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Rich , Jr.**

Mailing Address 81100 Old Highway

City Islamorada State FL Zip Code 33036-3715

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

Name of Employer Rich Products Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : A-C7084**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 4 Tiffany Lane

City Bedford State NH Zip Code 03110-4643

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

Name of Employer Riley Enterprises Inc Occupation Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : A-C7230**

Amount of Each Receipt this Period  
**250**

**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 29 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Wilma Schopp**

Mailing Address 1 Chipper Road

City Saint Louis State MO Zip Code 63131-3410

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

Name of Employer Sigma Aldrich Occupation Human Resources

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : A-C7083**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Daniel Sempolinski**

Mailing Address 5 Overbrook Road

City Painted Post State NY Zip Code 14870-9351

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

Name of Employer Corning Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7319**

Amount of Each Receipt this Period  
**300**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Shawn H. Smeallie**

Mailing Address 1310 Bishop Lane

City Alexandria State VA Zip Code 22302-3401

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

Name of Employer American Continental Group Occupation Managing Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2012

**Transaction ID : A-C7258**

Amount of Each Receipt this Period  
**500**

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

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

**1050.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Justin G Smith**

Mailing Address 14 Grovehill Court

City State Zip Code  
Downtown PA 19335-1293

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

Name of Employer Occupation  
Johnson & Johnson HR Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : A-C7098**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William T. Smith III**

Mailing Address 551 Hibbard Road

City State Zip Code  
Horseheads NY 14845-7943

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

Name of Employer Occupation  
Self Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2350**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7177**

Amount of Each Receipt this Period  
**50**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael H. Sweet**

Mailing Address 16 Robie Street

City State Zip Code  
Bath NY 14810-1130

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

Name of Employer Occupation  
Corning Country Club General Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2012

**Transaction ID : A-C7184**

Amount of Each Receipt this Period  
**50**

Contribution

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

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

**150.00**

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

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

FOR LINE NUMBER: PAGE 31 OF 73  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ryan Thompson**

Mailing Address 600 Second Street

City State Zip Code  
Alexandria VA 22314-1496

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

Name of Employer Occupation  
Ogilvy Govt. Relations Senior VP

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7244**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Douglas Tiftt**

Mailing Address 70 Durland Avenue

City State Zip Code  
Elmira NY 14905-1939

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

Name of Employer Occupation  
Hardinge Inc VP

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 04 / 2012

**Transaction ID : A-C7106**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Ms Elena Tompkins**

Mailing Address 3042 Dent Place NW

City State Zip Code  
Washington DC 20007-2915

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

Name of Employer Occupation  
Ogilvy Government Relations Sr. Vice Presidnet

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2012

**Transaction ID : A-C7260**

Amount of Each Receipt this Period  
**500**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Debra L. Waggoner**

Mailing Address 5119 Wissioming Road

City State Zip Code  
Bethesda MD 20816-2208

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

Name of Employer Occupation  
Corning, Inc. Director Global Govt Affairs

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7149**

Amount of Each Receipt this Period  
 Contribution **500**

**B.** Full Name (Last, First, Middle Initial)  
**Wendell P. Weeks**

Mailing Address 10806 Hidden Meadow Trail

City State Zip Code  
Corning NY 14830-9493

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

Name of Employer Occupation  
Corning Inc. Chairman & CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7132**

Amount of Each Receipt this Period  
 Contribution **2500**

**C.** Full Name (Last, First, Middle Initial)  
**Curt Weinstein**

Mailing Address 1408 Riff Road

City State Zip Code  
Corning NY 14830-9029

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

Name of Employer Occupation  
Advanced Optics VP & GM

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2050**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7130**

Amount of Each Receipt this Period  
 Contribution **50**

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

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

**3050.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Curt Weinstein**

Mailing Address 1408 Riff Road

City State Zip Code  
Corning NY 14830-9029

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

Name of Employer Occupation  
Advanced Optics VP & GM

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2050**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 17 / 2012**

**Transaction ID : A-C7135**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Matthew Wendroff**

Mailing Address 5200 Seneca Point Road

City State Zip Code  
Canandaigua NY 14424-8921

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

Name of Employer Occupation  
Vortex Software Consulting Exec/Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 05 / 2012**

**Transaction ID : A-C7261**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Patrice Willetts**

Mailing Address 416 Robert E Lee Drive

City State Zip Code  
Wilmington NC 28412-6732

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

Name of Employer Occupation  
Self Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 05 / 2012**

**Transaction ID : A-C7227**

Amount of Each Receipt this Period  
**1000**

**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: (check only one)	PAGE 34 OF 73
	<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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Brendan Williams**

Mailing Address 922 N Overlook Drive

City State Zip Code  
Alexandria VA 22305-1149

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

Name of Employer Occupation  
AFPM Government Relations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 12 / 2012**

**Transaction ID : A-C6992**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Todd Woodburn**

Mailing Address 12221 E Central Avenue

City State Zip Code  
Wichita KS 67206-2819

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

Name of Employer Occupation  
Coldwell Banker Plaza Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 05 / 2012**

**Transaction ID : A-C7231**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas Young**

Mailing Address 7 Center Crossing

City State Zip Code  
Fairport NY 14450-8715

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

Name of Employer Occupation  
Harter, Secret & Emery Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1429**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 16 / 2012**

**Transaction ID : A-C7077**

Amount of Each Receipt this Period  
**100**

**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 35 OF 73  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Christine Zadrozny**

Mailing Address 117 Birch Street

City Southington State CT Zip Code 06489-1106

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

Name of Employer Self Occupation Home Builder

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : A-C7228**

Amount of Each Receipt this Period  
 300

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

300.00

49935.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 73
<input type="checkbox"/> 11a 12	<input checked="" 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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alleghany County Women's Republican Club**

Mailing Address 16 Norton Street

City Belmont State NY Zip Code 14813-1042

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : A-C7324**

Amount of Each Receipt this Period  
**250**

Permissible Funds

**B.** Full Name (Last, First, Middle Initial)  
**Committee To Elect Tom Santulli**

Mailing Address 474 Clark Hollow Road

City Pine City State NY Zip Code 14871-9534

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : A-C7134**

Amount of Each Receipt this Period  
**500**

Permissible Funds

**C.** Full Name (Last, First, Middle Initial)  
**Ellery Republican Committee**

Mailing Address 4497 Maple Grove Road

City Bemus Point State NY Zip Code 14712-9515

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : A-C7144**

Amount of Each Receipt this Period  
**50**

Permissible Funds

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

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

**800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 73
	<input type="checkbox"/> 11a 12 <input checked="" 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)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ellery Republican Committee**

Mailing Address 4497 Maple Grove Road

City Bemus Point State NY Zip Code 14712-9515

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7145**

Amount of Each Receipt this Period  
 200

Permissible Funds

**B.** Full Name (Last, First, Middle Initial)  
**Friends Of David V. Cole**

Mailing Address 10620 Davis Hollow Road

City Cohocton State NY Zip Code 14826-9715

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : A-C7069**

Amount of Each Receipt this Period  
 50

**C.** Full Name (Last, First, Middle Initial)  
**Steuben County Republican Committee**

Mailing Address 310 Maple Heights

City Bath State NY Zip Code 14810-9302

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2012

**Transaction ID : A-C7186**

Amount of Each Receipt this Period  
 1000

Permissible Funds

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 73
	<input type="checkbox"/> 11a 12 <input checked="" 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)  
**Tom Reed for Congress**

**A. Town Of Middlesex Republican Committee**

Full Name (Last, First, Middle Initial)  
Town Of Middlesex Republican Committee

Mailing Address PO Box 635

City: Rushville      State: NY      Zip Code: 14544-0635

FEC ID number of contributing federal political committee: C

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For: 2012  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_ 900

Date of Receipt: 10 / 17 / 2012

**Transaction ID : A-C7182**

Amount of Each Receipt this Period: \_\_\_\_\_ 900

Permissible Funds: \_\_\_\_\_

**B. Town Of Torrey Republican Committee**

Full Name (Last, First, Middle Initial)  
Town Of Torrey Republican Committee

Mailing Address 1126 Leach Road  
Attn COLBYPETERSEN

City: Penn Yan      State: NY      Zip Code: 14527-9798

FEC ID number of contributing federal political committee: C

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For: 2012  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_ 1000

Date of Receipt: 10 / 17 / 2012

**Transaction ID : A-C7172**

Amount of Each Receipt this Period: \_\_\_\_\_ 1000

Permissible Funds: \_\_\_\_\_

**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

Amount of Each Receipt this Period: \_\_\_\_\_

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

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

1900.00

3950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AICPA**

Mailing Address 220 Leigh Farm Road

City State Zip Code  
Durham NC 27707-8110

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : A-C7318**

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Air Conditioning Contractors Assoc. PAC**

Mailing Address 2800 S Shirlington Road  
Suite 300

City State Zip Code  
Arlington VA 22206-3607

FEC ID number of contributing federal political committee. **C** C00100974

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 15 / 2012

**Transaction ID : A-C7081**

Amount of Each Receipt this Period  
1500

**C.** Full Name (Last, First, Middle Initial)  
**Aircraft Owners & Pilots Association PAC**

Mailing Address 421 Aviation Way

City State Zip Code  
Frederick MD 21701-4756

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : A-C7168**

Amount of Each Receipt this Period  
1000  
Contribution

**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 40 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

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

Mailing Address 101 Constitution Avenue NW  
Suite 400W

City Washington State DC Zip Code 20001-2155

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : A-C7140**

Amount of Each Receipt this Period  
Contribution 2000

**B.** Full Name (Last, First, Middle Initial)  
**American Benefits Council PAC**

Mailing Address 1501 M Street NW  
Suite 600

City Washington State DC Zip Code 20005-1775

FEC ID number of contributing federal political committee. **C C00153171**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : A-C7246**

Amount of Each Receipt this Period  
Contribution 1000

**C.** Full Name (Last, First, Middle Initial)  
**American Optometric Association PAC**

Mailing Address 1505 Prince Street  
Suite 300

City Alexandria State VA Zip Code 22314-2874

FEC ID number of contributing federal political committee. **C C00024968**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 10 / 2012

**Transaction ID : A-C7166**

Amount of Each Receipt this Period  
Contribution 1500

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

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

4500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Seniors Housing Assoc PAC**

Mailing Address 5100 Wisconsin Avenue NW  
Suite 3

City Washington State DC Zip Code 20016-4119

FEC ID number of contributing federal political committee. **C** C00325332

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : A-C7066**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Ameriprise Financial**

Mailing Address 101 Constitution Avenue NW  
Suite 912 W

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00414474

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : A-C7076**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**AMT- The Association for Manufacturing Technology Machine TOOLPAC**

Mailing Address 7901 Westpark Drive

City Mc Lean State VA Zip Code 22102-4206

FEC ID number of contributing federal political committee. **C** C00034173

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : A-C7067**

Amount of Each Receipt this Period  
1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**Blackrock Capital Management PAC**

Mailing Address 40 E 52nd Street

City State Zip Code  
New York NY 10022-5911

FEC ID number of contributing federal political committee. **C C00479246**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7250**

Amount of Each Receipt this Period  
1000

**B. Full Name (Last, First, Middle Initial)**  
**Ebay Inc Committee For Responsible Internet Service**

Mailing Address 228 S Washington Street  
Suite 115

City State Zip Code  
Alexandria VA 22314-5404

FEC ID number of contributing federal political committee. **C C00342394**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7248**

Amount of Each Receipt this Period  
2500

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

Mailing Address 101 Constitution Avenue NW  
Suite 400

City State Zip Code  
Washington DC 20001-2133

FEC ID number of contributing federal political committee. **C C00141218**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7249**

Amount of Each Receipt this Period  
1500

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

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

5000.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 43 OF 73

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Fraternity & Sorority PAC**

Mailing Address PO Box 3435

City Alexandria State VA Zip Code 22302-0435

FEC ID number of contributing federal political committee. **C** C00410068

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7137**

Amount of Each Receipt this Period  
 Contribution 2500

**B.** Full Name (Last, First, Middle Initial)  
**Freshman Hold'Em PAC**

Mailing Address PO Box 75021

City Washington State DC Zip Code 20013-0021

FEC ID number of contributing federal political committee. **C** C00523985

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 416.53

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 16 / 2012

**Transaction ID : A-I7315**

Amount of Each Receipt this Period  
 Inkind: event space fee 78.4

**C.** Full Name (Last, First, Middle Initial)  
**General Dynamics Corporation Political Action Committee (GDC PAC)**

Mailing Address 2941 Fairview Park Drive Suite 100

City Falls Church State VA Zip Code 22042-4541

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7170**

Amount of Each Receipt this Period  
 Contribution 1000

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

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

3578.40

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A. Google NETPAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 New York Avenue NW  
 Floor 2  
 City Washington State DC Zip Code 20005-4344  
 FEC ID number of contributing federal political committee. **C C00428623**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : A-C7139**  
 Amount of Each Receipt this Period  
 Contribution 2000

**B. Hartford Financial Services Group PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 Hartford Plaza  
 City Hartford State CT Zip Code 06155-0001  
 FEC ID number of contributing federal political committee. **C C00168864**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : A-C7245**  
 Amount of Each Receipt this Period  
 Contribution 2000

**C. Hilton Worldwide PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7930 Jones Branch Drive  
 Suite 1100  
 City Mc Lean State VA Zip Code 22102-3313  
 FEC ID number of contributing federal political committee. **C C00213074**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : A-C7152**  
 Amount of Each Receipt this Period  
 Contribution 1000

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ing US PAC**

Mailing Address 601 13th Street NW  
Suite 450

City Washington State DC Zip Code 20005-3807

FEC ID number of contributing federal political committee. **C** C00184028

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : A-C7253**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Employees PAC**

Mailing Address 2121 Crystal Drive  
Suite 100

City Arlington State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 15 / 2012

**Transaction ID : A-C7074**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Nat. Assoc. of Ins. & Financial Advisors**

Mailing Address 2901 Telestar Court

City Falls Church State VA Zip Code 22042-1260

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : A-C7150**

Amount of Each Receipt this Period  
2500  
Contribution

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A. Newfield PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1001 17th Street  
 Suite 2000  
 City State Zip Code  
 Denver CO 80202-2035  
 FEC ID number of contributing federal political committee. **C C00443523**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 15 2012  
**Transaction ID : A-C7082**  
 Amount of Each Receipt this Period  
 1500

**B. NFG FEDPAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 Lafayette Square  
 City State Zip Code  
 Buffalo NY 14203-1824  
 FEC ID number of contributing federal political committee. **C C00083758**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 8000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 17 2012  
**Transaction ID : A-C7167**  
 Amount of Each Receipt this Period  
 2000  
 Contribution

**C. Phillips 66 PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 260 M Plaza Office Bldg.  
 City State Zip Code  
 Bartlesville OK 74004-0001  
 FEC ID number of contributing federal political committee. **C C00513549**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 17 2012  
**Transaction ID : A-C7171**  
 Amount of Each Receipt this Period  
 1000  
 Contribution

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pricewaterhouse Coopers PAC**

Mailing Address 1301 K Street NW  
Suite 800

City Washington State DC Zip Code 20005-3317

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : A-C7073**

Amount of Each Receipt this Period  
 3000

**B.** Full Name (Last, First, Middle Initial)  
**Realogy Corporation Pac (Realogy PAC)**

Mailing Address 1 Campus Drive

City Parsippany State NJ Zip Code 07054-4407

FEC ID number of contributing federal political committee. **C C00424218**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7169**

Amount of Each Receipt this Period  
 1000

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**SIFMA-PAC**

Mailing Address 1101 New York Avenue NW

City Washington State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C C00431312**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7252**

Amount of Each Receipt this Period  
 1000

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SNR Denton**

Mailing Address 1301 K Street NW  
Suite 600, East Tower

City Washington State DC Zip Code 20005-3317

FEC ID number of contributing federal political committee. **C C00216127**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7138**

Amount of Each Receipt this Period  
 Contribution **2000**

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

Mailing Address 6405 Metcalf Avenue  
Suite 503

City Shawnee Mission State KS Zip Code 66202-4084

FEC ID number of contributing federal political committee. **C C00330118**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-C7141**

Amount of Each Receipt this Period  
 Contribution **1000**

**C.** Full Name (Last, First, Middle Initial)  
**Time Warner Cable Federal PAC**

Mailing Address 901 F Street NW  
Suite 800

City Washington State DC Zip Code 20004-1477

FEC ID number of contributing federal political committee. **C C00431551**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : A-C7219**

Amount of Each Receipt this Period  
 Contribution **1000**

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

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

**4000.00**



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

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

FOR LINE NUMBER: PAGE 49 OF 73  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**UBS Americas Inc PAC**

Mailing Address 1501 K Street NW  
Suite 1100

City Washington State DC Zip Code 20005-1410

FEC ID number of contributing federal political committee. **C C00012245**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : A-C7247**

Amount of Each Receipt this Period  
**2500**

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

Mailing Address 316 Pennsylvania Avenue SE  
Suite 300

City Washington State DC Zip Code 20003-1173

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : A-C7251**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Vanguard Committee for Responsible Government**

Mailing Address 975 F Street NW, Suite 500  
Attn: Brian Mattes

City Washington State DC Zip Code 20004-1457

FEC ID number of contributing federal political committee. **C C00410266**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : A-C7153**

Amount of Each Receipt this Period  
**500**

Contribution

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

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

**3500.00**

**45578.40**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 73
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Freshman Hold'Em PAC**

Mailing Address **PO Box 75021**

City **Washington** State **DC** Zip Code **20013-0021**

FEC ID number of contributing federal political committee. **C C00523985**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**416.53**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 17 / 2012**

**Transaction ID : A-T7243**

Amount of Each Receipt this Period  
**108.96**

**B.** Full Name (Last, First, Middle Initial)  
**Gardner for Congress 2012**

Mailing Address **1420 W Canal Court Suite 10**

City **Littleton** State **CO** Zip Code **80120-5660**

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2083.33**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 17 / 2012**

**Transaction ID : A-T1879**

Amount of Each Receipt this Period  
**83.33**

**[MEMO ITEM]**  
Transfer Itemization Memo

**C.** Full Name (Last, First, Middle Initial)  
**Freedom Matters PAC**

Mailing Address **8410 Highway 90A Suite 100**

City **Sugar Land** State **TX** Zip Code **77478-3188**

FEC ID number of contributing federal political committee. **C C00491910**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**25**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 17 / 2012**

**Transaction ID : A-T1878**

Amount of Each Receipt this Period  
**25**

**[MEMO ITEM]**  
Transfer Itemization Memo

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

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

**108.96**

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

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

FOR LINE NUMBER: PAGE 51 OF 73  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Martin S Craighead**

Mailing Address 31 Damask Rose Way

City State Zip Code  
The Woodlands TX 77382-2716

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

Name of Employer Occupation  
Baker Hughes President & COO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.63**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**10 / 17 / 2012**

**Transaction ID : A-T1877**

Amount of Each Receipt this Period  
**0.63**

**[MEMO ITEM]**  
Transfer Itemization Memo

**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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**0.00**

**108.96**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Tom Reed for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Diane For Congress**

Mailing Address PO Box 1437

City Gallatin State TN Zip Code 37066-1437

FEC ID number of contributing federal political committee. **C** C00472878

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : A-07328**

Amount of Each Receipt this Period  
 2000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2000.00

2000.00

**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 53 OF 73			
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Advantage, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2012
Mailing Address 2300 Clarendon Boulevard Suite 1004		Amount of Each Disbursement this Period 2910 <b>Transaction ID : B-E-7285</b>
City Arlington	State VA	
Zip Code 22201-3367	Purpose of Disbursement Teleforum	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Aristotle International Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 310.25 <b>Transaction ID : B-E-7309</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Fundraising: Transaction fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address PO Box 105306		Amount of Each Disbursement this Period 176.81 <b>Transaction ID : B-E-7302</b>
City Atlanta	State GA	
Zip Code 30348-5306	Purpose of Disbursement phone service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3397.06
<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 54 OF 73			
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Eastern Copy Products</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 1224 W Genesee Street		Amount of Each Disbursement this Period 359.21 <b>Transaction ID : B-E-7296</b>
City Syracuse	State NY	
Zip Code 13204-2104	Purpose of Disbursement copier repair	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Frontier Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address PO Box 20550		Amount of Each Disbursement this Period 372.35 <b>Transaction ID : B-E-7300</b>
City Rochester	State NY	
Zip Code 14602-0550	Purpose of Disbursement phone service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Integram</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address 22695 Commerce Center Court Suite 170		Amount of Each Disbursement this Period 809.64 <b>Transaction ID : B-E-7284</b>
City Sterling	State VA	
Zip Code 20166-2037	Purpose of Disbursement Fundraising: direct mail postage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1541.20
<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 55 OF 73			
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial)  
**A. IRS**

Mailing Address 310 Lowell Street

City Andover State MA Zip Code 01810-5430

Purpose of Disbursement Administrative/Salary/Overhead: payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 01 / 2012

Amount of Each Disbursement this Period: 2175.22

Transaction ID : B-E-7278

Category/Type: 001

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

Mailing Address 310 Lowell Street

City Andover State MA Zip Code 01810-5430

Purpose of Disbursement payroll taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 15 / 2012

Amount of Each Disbursement this Period: 2175.16

Transaction ID : B-E-7277

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**c. M & T Bank**

Mailing Address 5 E Market Street

City Corning State NY Zip Code 14830-2642

Purpose of Disbursement service fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 17 / 2012

Amount of Each Disbursement this Period: 2.5

Transaction ID : B-E-7312

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... 4352.88

**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 56 OF 73
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mailchimp</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address 512 Means Street NW		Amount of Each Disbursement this Period 42.5 <b>Transaction ID : B-E-7311</b>
City Atlanta State GA Zip Code 30318-5798	Purpose of Disbursement processing fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mario's ItalianSteakhouse and Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 2740 Monroe Avenue		Amount of Each Disbursement this Period 100 <b>Transaction ID : B-E-7305</b>
City Rochester State NY Zip Code 14618-4116	Purpose of Disbursement Fundraising: deposit Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mediascape</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 189 N Water Street		Amount of Each Disbursement this Period 270400 <b>Transaction ID : B-E-7306</b>
City Rochester State NY Zip Code 14604-1163	Purpose of Disbursement media buy Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	270542.50
<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 57 OF 73	
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mediascape</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 08 / 2012</b>
Mailing Address <b>189 N Water Street</b>		Amount of Each Disbursement this Period <b>113928</b> <b>Transaction ID : B-E-7286</b>
City <b>Rochester</b> State <b>NY</b> Zip Code <b>14604-1163</b>	Purpose of Disbursement printed matter,yard signs <b>001</b> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. National Republican Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2012</b>
Mailing Address <b>320 1st Street SE</b>		Amount of Each Disbursement this Period <b>50000</b> <b>Transaction ID : B-E-7291</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-1838</b>	Purpose of Disbursement Political Contribution: donation <b>011</b> Category/ Type	
Candidate Name <b>National Republican Congressional Committee</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. NY Republican State Comm.Federal Acct</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2012</b>
Mailing Address <b>315 State Street</b>		Amount of Each Disbursement this Period <b>50000</b> <b>Transaction ID : B-E-7290</b>
City <b>Albany</b> State <b>NY</b> Zip Code <b>12210-2001</b>	Purpose of Disbursement Political Contribution: Empire NY Fund <b>011</b> Category/ Type	
Candidate Name <b>NY Republican State Comm.Federal Acct</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>113928.00</b>
<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 58 OF 73			
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paypal</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 2211 N 1st Street		Amount of Each Disbursement this Period 952.68 <b>Transaction ID : B-E-7314</b>
City San Jose	State CA	
Zip Code 95131-2021	Purpose of Disbursement service fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Phoenix Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 1525 Emerson Street		Amount of Each Disbursement this Period 2268 <b>Transaction ID : B-E-7292</b>
City Rochester	State NY	
Zip Code 14606-3117	Purpose of Disbursement printed material	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 401 W 15th Street Suite 520		Amount of Each Disbursement this Period 5.85 <b>Transaction ID : B-E-7310</b>
City Austin	State TX	
Zip Code 78701-1671	Purpose of Disbursement processing fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3226.53
<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 59 OF 73			
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Roland-Kelly Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 340 S Pickett Street Unit 9712		Amount of Each Disbursement this Period 5000 <b>Transaction ID : B-E-7298</b>
City Alexandria State VA Zip Code 22304-8125	Purpose of Disbursement Administrative/Salary/Overhead: mailings 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Roland-Kelly Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 340 S Pickett Street Unit 9712		Amount of Each Disbursement this Period 20386.88 <b>Transaction ID : B-E-7299</b>
City Alexandria State VA Zip Code 22304-8125	Purpose of Disbursement production & mailings 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Roland-Kelly Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2012
Mailing Address 340 S Pickett Street Unit 9712		Amount of Each Disbursement this Period 62592.6 <b>Transaction ID : B-E-7287</b>
City Alexandria State VA Zip Code 22304-8125	Purpose of Disbursement printing & mailing 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	87979.48
<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 60 OF 73	
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Roland-Kelly Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 13 / 2012</b>
Mailing Address <b>340 S Pickett Street Unit 9712</b>		Amount of Each Disbursement this Period <b>57505.86</b> <b>Transaction ID : B-E-7282</b>
City <b>Alexandria</b> State <b>VA</b> Zip Code <b>22304-8125</b>	Purpose of Disbursement <b>Fundraising: mail house activities</b> <b>003</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. RR Resource Recovery</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2012</b>
Mailing Address <b>88 Tioga Avenue Suite 201</b>		Amount of Each Disbursement this Period <b>600</b> <b>Transaction ID : B-E-7303</b>
City <b>Corning</b> State <b>NY</b> Zip Code <b>14830-2858</b>	Purpose of Disbursement <b>Administrative/Salary/Overhead: rent</b> <b>001</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RR Resource Recovery</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2012</b>
Mailing Address <b>88 Tioga Avenue Suite 201</b>		Amount of Each Disbursement this Period <b>270.48</b> <b>Transaction ID : B-E-7304</b>
City <b>Corning</b> State <b>NY</b> Zip Code <b>14830-2858</b>	Purpose of Disbursement <b>utilities</b> <b>001</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>58376.34</b>
<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 61 OF 73			
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Schwarz Pro Foto</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 10889 Brown Road		Amount of Each Disbursement this Period 100 <b>Transaction ID : B-E-7294</b>
City Corning	State NY	
Zip Code 14830-3759	Purpose of Disbursement photography	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. The Tarrance Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 201 N Union Street Suite 410		Amount of Each Disbursement this Period 14422 <b>Transaction ID : B-E-7297</b>
City Alexandria	State VA	
Zip Code 22314-2649	Purpose of Disbursement Polling: polling	Category/ Type 005
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Time Warner Cable</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address PO Box 2086		Amount of Each Disbursement this Period 199.98 <b>Transaction ID : B-E-7295</b>
City Binghamton	State NY	
Zip Code 13902-2086	Purpose of Disbursement phone service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14721.98
<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 62 OF 73	
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Time Warner Cable</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2012</b>
Mailing Address <b>PO Box 2086</b>		Amount of Each Disbursement this Period <b>657.91</b> <b>Transaction ID : B-E-7301</b>
City <b>Binghamton</b> State <b>NY</b> Zip Code <b>13902-2086</b>	Purpose of Disbursement phone service Candidate Name <b>001</b> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. US Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 03 / 2012</b>
Mailing Address <b>1857 Dewey Avenue</b>		Amount of Each Disbursement this Period <b>450</b> <b>Transaction ID : B-E-7293</b>
City <b>Rochester</b> State <b>NY</b> Zip Code <b>14615-2903</b>	Purpose of Disbursement Administrative/Salary/Overhead: postage Candidate Name <b>001</b> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>c. US Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 17 / 2012</b>
Mailing Address <b>1857 Dewey Avenue</b>		Amount of Each Disbursement this Period <b>450</b> <b>Transaction ID : B-E-7280</b>
City <b>Rochester</b> State <b>NY</b> Zip Code <b>14615-2903</b>	Purpose of Disbursement Administrative/Salary/Overhead: postage Candidate Name <b>001</b> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1557.91</b>
<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 63 OF 73	
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Visa Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 02 / 2012</b>
Mailing Address <b>PO Box 790408</b>		Amount of Each Disbursement this Period <b>10908.68</b>
City <b>Saint Louis</b>	State <b>MO</b>	Zip Code <b>63179-0408</b>
Purpose of Disbursement see below	<input type="checkbox"/> 001	<b>Transaction ID : B-E-7308</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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. Staples Office Supplies</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 02 / 2012</b>
Mailing Address <b>1370 W Ridge Road</b>		Amount of Each Disbursement this Period <b>468.21</b>
City <b>Rochester</b>	State <b>NY</b>	Zip Code <b>14615-2418</b>
Purpose of Disbursement office supplies	<input type="checkbox"/> 001	<b>Transaction ID : B-S-116</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Visa Cardmember Service(10/02/12)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hilton Clearwater Beach</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 02 / 2012</b>
Mailing Address <b>400 Mandalay Avenue</b>		Amount of Each Disbursement this Period <b>240.8</b>
City <b>Clearwater Beach</b>	State <b>FL</b>	Zip Code <b>33767-2011</b>
Purpose of Disbursement catering	<input type="checkbox"/> 003	<b>Transaction ID : B-S-123</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Visa Cardmember Service(10/02/12)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>10908.68</b>
<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 64 OF 73	
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hilton Clearwater Beach</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address 400 Mandalay Avenue		Amount of Each Disbursement this Period 1204
City Clearwater Beach	State FL	Zip Code 33767-2011
Purpose of Disbursement catering	Category/Type 003	
Candidate Name	Transaction ID : B-S-121	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	[MEMO ITEM]
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Subitemization of Visa Cardmember Service(10/02/12)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Salesforce Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address 1 Market Street Suite 300		Amount of Each Disbursement this Period 645
City San Francisco	State CA	Zip Code 94105-1315
Purpose of Disbursement printed material	Category/Type	
Candidate Name	Transaction ID : B-S-120	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	[MEMO ITEM]
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Subitemization of Visa Cardmember Service(10/02/12)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Corner Bakery</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address 1425 K Street NW Front 1		Amount of Each Disbursement this Period 226.63
City Washington	State DC	Zip Code 20005-3546
Purpose of Disbursement catering	Category/Type 003	
Candidate Name	Transaction ID : B-S-117	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	[MEMO ITEM]
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Subitemization of Visa Cardmember Service(10/02/12)
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 65 OF 73	
	<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)  
**Tom Reed for Congress**

**A. Liaison Capitol**

Full Name (Last, First, Middle Initial)  
Mailing Address 415 New Jersey Avenue NW

City Washington State DC Zip Code 20001-2001

Purpose of Disbursement travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 02 / 2012

Amount of Each Disbursement this Period: 1852.4

Transaction ID : B-S-118

**[MEMO ITEM]**  
Subitemization of Visa Cardmember Service(10/02/12)

**B. Corning Country Club**

Full Name (Last, First, Middle Initial)  
Mailing Address 2501 Country Club Drive

City Corning State NY Zip Code 14830-3694

Purpose of Disbursement catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 02 / 2012

Amount of Each Disbursement this Period: 1517.44

Transaction ID : B-S-115

**[MEMO ITEM]**  
Subitemization of Visa Cardmember Service(10/02/12)

**c. Radisson Hotel Corning**

Full Name (Last, First, Middle Initial)  
Mailing Address 125 Denison Parkway E

City Corning State NY Zip Code 14830-2704

Purpose of Disbursement catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 02 / 2012

Amount of Each Disbursement this Period: 693.74

Transaction ID : B-S-114

**[MEMO ITEM]**  
Subitemization of Visa Cardmember Service(10/02/12)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 73	
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. USAirways</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address 4000 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 470.6
City Phoenix	State AZ Zip Code 85034-3802	
Purpose of Disbursement travel	Category/Type 003	<b>Transaction ID : B-S-122</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Visa Cardmember Service(10/02/12)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Google.com</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address		Amount of Each Disbursement this Period 1000
City	State Zip Code	
Purpose of Disbursement social media advertising	Category/Type 001	<b>Transaction ID : B-S-119</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Visa Cardmember Service(10/02/12)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Votesane PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address PO Box 2713		Amount of Each Disbursement this Period 507.5
City Alexandria	State VA Zip Code 22301-0713	
Purpose of Disbursement Fundraising: processing fee	Category/Type 003	<b>Transaction ID : B-E-7313</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	507.50
<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 67 OF 73			
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pamela F Baker</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 500 Allens Creek Road		Amount of Each Disbursement this Period 2228.53 <b>Transaction ID : B-E-7270</b>
City Rochester State NY Zip Code 14618-3406	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Pamela F Baker</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address 500 Allens Creek Road		Amount of Each Disbursement this Period 1361.34 <b>Transaction ID : B-E-7307</b>
City Rochester State NY Zip Code 14618-3406	Purpose of Disbursement reimbursement/catering/mileage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Pamela F Baker</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2012
Mailing Address 500 Allens Creek Road		Amount of Each Disbursement this Period 497.6 <b>Transaction ID : B-E-7281</b>
City Rochester State NY Zip Code 14618-3406	Purpose of Disbursement Reimbursement - flags Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4087.47
<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 68 OF 73	
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pamela F Baker</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 500 Allens Creek Road		Amount of Each Disbursement this Period 2228.54 <b>Transaction ID : B-E-7271</b>
City Rochester State NY Zip Code 14618-3406	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Christine R Burke</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address PO Box 16605		Amount of Each Disbursement this Period 615.15 <b>Transaction ID : B-E-7269</b>
City Rochester State NY Zip Code 14616-0605	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Christine R Burke</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address PO Box 16605		Amount of Each Disbursement this Period 615.14 <b>Transaction ID : B-E-7276</b>
City Rochester State NY Zip Code 14616-0605	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3458.83
<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 69 OF 73	
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jacqueline Chiarot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 4931 Marshall Avenue		Amount of Each Disbursement this Period 786.22 <b>Transaction ID : B-E-7267</b>
City Bemus Point	State NY Zip Code 14712-9657	
Purpose of Disbursement Administrative/Salary/Overhead: payroll		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jacqueline Chiarot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 4931 Marshall Avenue		Amount of Each Disbursement this Period 786.22 <b>Transaction ID : B-E-7274</b>
City Bemus Point	State NY Zip Code 14712-9657	
Purpose of Disbursement Administrative/Salary/Overhead: payroll		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. James Tsu-Yao Hung</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 28 Goodman St		Amount of Each Disbursement this Period 200 <b>Transaction ID : B-E-7289</b>
City Rochester	State NY Zip Code 14607	
Purpose of Disbursement Administrative/Salary/Overhead: rent		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1772.44
<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 70 OF 73	
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Joseph Sempolinski</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 102 Davis Street Apt. 201		Amount of Each Disbursement this Period 1553.65 <b>Transaction ID : B-E-7265</b>
City Corning State NY Zip Code 14830-1804	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mr. Joseph Sempolinski</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 102 Davis Street Apt. 201		Amount of Each Disbursement this Period 1553.66 <b>Transaction ID : B-E-7272</b>
City Corning State NY Zip Code 14830-1804	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Elizabeth A Shaffer</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 251 Sibley Road		Amount of Each Disbursement this Period 947.23 <b>Transaction ID : B-E-7266</b>
City Honeoye Falls State NY Zip Code 14472-9307	Purpose of Disbursement Administrative/Salary/Overhead: payroll Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4054.54
<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 71 OF 73	
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Elizabeth A Shaffer</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 251 Sibley Road		Amount of Each Disbursement this Period 947.24 <b>Transaction ID : B-E-7273</b>
City Honeoye Falls	State NY	
Zip Code 14472-9307	Purpose of Disbursement Administrative/Salary/Overhead: payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Lisa Vanstrom</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 55 Plummer Ave W.E.		Amount of Each Disbursement this Period 276 <b>Transaction ID : B-E-7288</b>
City Jamestown	State NY	
Zip Code 14701	Purpose of Disbursement Administrative/Salary/Overhead: mileage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Nick Weinstein</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 1408 Riff Road		Amount of Each Disbursement this Period 639.32 <b>Transaction ID : B-E-7268</b>
City Corning	State NY	
Zip Code 14830-9029	Purpose of Disbursement Administrative/Salary/Overhead: payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1862.56
<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 72 OF 73	
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nick Weinstein</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2012</b>
Mailing Address 1408 Riff Road		Amount of Each Disbursement this Period <b>639.32</b>
City Corning	State NY	
Zip Code 14830-9029	Purpose of Disbursement Administrative/Salary/Overhead: payroll	<b>Transaction ID : B-E-7275</b>
Candidate Name	Category/ Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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	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	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>639.32</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>586915.22</b>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 73	
	<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)  
**Tom Reed for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. James R. Houghton</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 17 / 2012</b>
Mailing Address 2649 Spencer Hill Road		Amount of Each Disbursement this Period <b>1250</b> <b>Transaction ID : B-E-7327</b>
City Corning	State NY	
Zip Code 14830-9506	Purpose of Disbursement refund of contribution	Category/ Type <b>012</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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>1250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>1250.00</b>